2013 ISS TOOLKIT

For the Assessment of Special Needs Plans (SNPs) Against the Structure and Process Measures

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2013 ISS Toolkit - SNP Reporting Key Messages

The following key messages are important and should be used to guide you through your organization's readiness evaluation and the ISS tool submission process.

- If your organization has more than one Special Needs Plan (SNP) benefit package, you must submit a separate survey tool for every SNP benefit package. Use the name of the SNP, H-number and plan ID to identify the correct survey tool.
- Prepare to submit ISS tool(s) early to avoid internet traffic delays but do not submit your ISS tool(s) later than October 15, 2013.
- Each SNP survey tool has a 1-4 person user license. Your organization's ISS administrator (this is the person who was sent the tool originally) can give three other individuals access to each of your survey tools.
- Do not push the "Submit Survey Tool" button unless your survey tool is complete and you are ready for NCQA surveyors to start the survey process.
- You must attach documentation to demonstrate performance for all factors and elements.
- When preparing for a survey please review the S&P measures, FAQs, any policy clarifications and training materials NCQA releases updating or clarifying the requirements. FAQs and policy clarifications are effective upon release (unless noted otherwise).

Reporting Requirements for SNP Type/Element

2013 ISS Toolkit – Reporting Requirements by SNP Type/Element

Measure/Element	New Surveys Reporting (Y or N)	Returning Surveys Reporting (Y or N)	SNP Type Exceptions
Measure - SNP 1: Care Management and Coordination			
Element A: Care Management Program Description	Y	Y	
Element B: Population Assessment	Y	Y	
Element C: Care Management Assessment Process	Y	Y	
Element D: Individualized Care Plan	Y	Y	
Element E: Satisfaction with Care Management	N	Y[1/]	
Element F: Analyzing Effectiveness/Identifying Opportunities	N	Y[1/]	
Element G: Implementing Interventions and Follow-up Evaluation	N	Y[1/]	
Measure - SNP 2: Improving Member Satisfaction			
Element A: Assessment of Member Satisfaction	Y[1/]	Y[1/]	
Element B: Opportunities for Improvement	Y[1/]	Y[1/]	
Element C: Improving Satisfaction	Y[1/]	Y[1/]	
Measure - SNP 3: Clinical Quality Improvements			
Element A: Clinical Improvements	N	Y	
Measure - SNP 4: Care Transitions			
Element A: Managing Transitions	Y	Y	
Element B: Supporting Members Through Transitions	Y	Y	
Element C: Analyzing Performance	Y[1/]	Y[1/]	
Element D: Identifying Unplanned Transitions	Y	Y	
Element E: Analyzing Transitions	Y[1/]	Y[1/]	
Element F: Reducing Transitions	Y	Y	
Measure - SNP 5: Institutional SNP Relationship With Facility			
Element A: Monitoring Members' Health Status	Y	Y	Not for Chronic/Duals
Element B: Monitoring Changes in Members' Health Status	Y	Y	Not for Chronic/Duals
Element C: Maintaining Members' Health Status	Y	Y	Not for Chronic/Duals
Measure - SNP 6: Coordination of Medicare and Medicaid Coverage			
Element A: Coordination of Benefits for Dual-Eligible Members	Y	Y	Not for Chronic/Institutional
Element B: Administrative Coordination for Dual-Eligible SNPs	Y	Y	Not for Chronic/Institutional
Element C: Administrative Coordination for Chronic Condition & Inst. BP	Y[2/]	Y[2/]	Not for Duals
Element D: Service Coordination	Y[2/]	Y[2/]	
Element E: Network Adequacy Assessment	Y[1/ 2/]	Y[1/ 2/]	

EXCEPTIONS

[1/] Not applicable (NA) for a SNP that does not have any members at the start of the look-back period; NCQA will verify enrollment data with the April 2013 CMS Comprehensive Report.

[2/] Not applicable (NA) for Chronic and Institutional SNPs with fewer than 5% dual-eligible members.

Data Sources by Element and Examples of Data Sources

2013 ISS Toolkit
Data Sources by Element

SNP	Data Sources
SNP 1: Care Management and Coordination	
Element A	Documented Processes
Element B	Documented Processes
Element C	Documented Processes AND Reports OR Materials
Element D	Documented Processes AND Reports OR Materials
Element E	Reports AND MAY PROVIDE Documented Processes
Element F	Reports AND MAY PROVIDE Documented Processes
Element G	Reports AND MAY PROVIDE Documented Processes
SNP 2: Improving Member Satisfaction	
Element A – for each factor	Documented Processes AND Reports
Element B – for each factor	Documented Processes AND Reports
Element C– for each factor	Documented Processes AND Reports
SNP 3: Clinical Quality Improvements	
Element A	Reports
SNP 4: Care Transitions	
Element A – for each factor[1]	Documented Processes AND reports OR materials
Element B – for each factor	Documented Processes AND reports OR materials
Element C – for each factor	Documented Processes AND reports
Element D – for each factor	Documented Processes AND reports
Element E – for each factor	Documented Processes AND reports
Element F – for each factor	Documented Processes AND reports OR materials
SNP 5: Institutional SNP Relationship with Facility	
Element A	Documented processes AND reports OR materials
Element B	Documented processes AND reports OR materials
Element C	Documented processes AND reports
SNP 6: Coordination of Medicare and Medicaid Coverage	
Element A	Reports AND MAY PROVIDE documented processes OR materials
Element B	Documented processes AND reports OR Materials
Element C	Documented processes AND reports OR materials
Element D	Documented processes AND reports OR materials
Element E – for each factor	Documented processes AND reports

If you would like examples of documented processes, reports or materials, please refer to the *Data Sources Examples document or the Guidelines for a Successful Evaluation of a Special Needs Plan (SNP) Against the 2013 Structure & Process Measures* document.

[1] SNPs must provide the required data sources to demonstrate performance specific to each factor. For example, for SNP 4, Element A, factor 1, the SNP must provide documented processes AND reports/materials. For factor 2, the SNP must provide documented process AND reports/materials. This applies to each element in SNP 4.

2013 ISS Toolkit
Examples of Data Sources

Documented Process - A documented process includes policies and procedures, process flow charts, protocols and other mechanisms that describe the actual processes a SNP uses.

Reports - Reports are aggregated sources of evidence of action or compliance with an element.

Materials - Prepared materials or content the organization provides to its members and practitioners.

Documented Process*	Materials*	Reports*
• Policies and procedures with timeframes where appropriate • Procedures for arranging services • Procedures for ordering services from providers • Contracts or agreements (especially for facilities' responsibilities with institutional SNPs and administering Medicaid benefits to dual-eligibles) • Procedures for network facilities to provide updates on members' health • Evidence of Coverage (EOC) • Models of Care (MOCs)	• Briefing materials • Checklists • Scripts • Education materials • Brochures • Information prepared for members' experiencing transitions • Benefit summaries • Marketing materials • Instructional materials • Provider directory • Provider manuals Newsletters	• Evidence of Coverage (EOC) • Management reports • Key indicator reports • Redacted reports (daily, monthly) • Redacted reports that show predictive modeling • Reports on overall rates of admission • Reports showing aggregate analysis • Summary reports of analysis • System output giving information • Meeting minutes • Documentation of actions that the SNP has taken • Written notification of scheduled meeting with state or state acknowledgement of receipt • Reports on access indicators • Screen shots (Actual reports required)

* This list is not all-inclusive

Guidelines for a Successful Evaluation of a Special Needs Plan (SNP) Against the 2013 Structure & Process Measures

Guidelines for a Successful Evaluation of a Special Needs Plan (SNP) Against the 2013 Structure & Process Measures

Welcome to the Structure & Process Measures survey process. The guidelines and resources contained in this document will help you prepare for your organization's survey and maximize the efficiency of your preparation time.

SNP Survey Process

Readiness Evaluation

NCQA's Web-based Survey Tool for the Evaluation of a Special Needs Plan allows your organization to perform a readiness evaluation at its own pace before submitting data to NCQA. You may assess your program's operations and evaluate your performance against the Structure & Process Measures. During the readiness evaluation stage, NCQA does not view your information; therefore, you can use the tool to its full capacity and evaluate your organization in a variety of ways.

Evaluation by NCQA

The NCQA survey process begins with the submission of the Survey Tool which is final upon receipt by NCQA. All Survey Tools are due to NCQA no later than October 15, 2013.

If you have specific questions about your preparation contact Customer Service at 888-275-7585, 8:30 a.m.–5:00 p.m. Eastern Time or via e-mail at customersupport@ncqa.org.

Preparing for the Readiness Evaluation

1. To facilitate the process, you may find it helpful to keep documents that you link to the Survey Tool in a single directory shared by all your users. This will facilitate multiple users working on the Survey Tool. You can modify, move or rename a linked document, since it is not final until you submit it to NCQA for the evaluation. If you move or rename documents, be sure to update the links in the Survey Tool before your final submission.

2. The **Document Library** includes a list of all documents loaded to your Survey Tool. From here, you can link, unlink or edit documents

for any element. Refer to the instructions under the **Help** tab for detailed information.

You can also add documents to the library without linking them to a specific element. This feature allows you to "load" your documents so that they are available in a list of documents that you can access when you need to link a document to an element during your readiness evaluation.

NCQA limits the types of documents you may send (see the list of recommended supporting documents at the end of these guidelines.)

NCQA encourages you to submit only documents, pages or sections necessary to demonstrate how your organization meets the requirements in the measures.

Preparing your documentation for submission in ISS requires you to follow several steps. The Toolkit contains written instructions and screenshots to walk you through each process. You must: **1)** load your documents to the Document Library; and **2)** link the documents to the appropriate element(s).

For instructions on loading and linking documents, please refer to pages 30-32 of the section titled *Steps and Screenshots for Key Activities.* This document walks you through each activity and directs you to several screenshots which illustrate the steps you need to follow such as: *screenshots 7A-7C (loading documents) and 7D-7E (linking documents).* In addition, you may wish to view a demo within the ISS Tool on how to do this. Select **Help and Instructions** on the dark blue tool bar; scroll down to **ISS Demonstrations** and click on ***Document Library***. Utilizing the available resources and following each of these steps are essential for successful preparation of your documentation for the submission process.

Completing the Survey Tool

Print out and use the instructions in the Survey Tool, which you can access by clicking the **Help** button on the Navigation Bar on the opening screen. The Structure & Process Survey Tool instructions appear on the next screen. They provide all the information necessary to successfully navigate and complete the tool and complete your readiness evaluation.

As you assess your performance with each factor and element, be sure to:

1. Preload your document library with essential documents that demonstrate performance against the measures.

2. Evaluate each element and load the appropriate document(s) that demonstrates performance by linking it to an existing library document or, if necessary, load a new document and link it by clicking the **Add Link** button. Each factor and element must have supporting documentation. If possible, limit supporting documentation to no more than three documents per element.

   For detailed instructions please refer to the section titled: *Steps and Screenshots for Key Activities* which starts on page 30 (be sure to view *screenshots 7A-7E*) of this guide. After entering a data element, save it before moving on by clicking the **Save** button or the **Next Standard** button.

3. For each supporting document listed, you must:

   • identify the page number containing the information that supports the factor or element, as specified in the Survey Tool.

   • attach only pages and sections necessary to demonstrate how your organization meets the measures, as well as any cover page that identifies the document and, if applicable, provides its date. If you reference a document multiple times, you may place the entire document in the document library and reference different pages and paragraphs throughout your assessment.

If you wish to stop using the Survey Tool, click on the **Log Out** button located on the Navigation Bar. You should log out even if you only plan a short break. This will properly notify the system that you are done with your session. If you do not log out, the Survey Tool will “time-out” after 30 minutes of inactivity.

NCQA Resources

Online Support	NCQA's SNP Web page, http://www.ncqa.org/snp contains a wealth of information that includes recent news from NCQA, the Policy Clarification Support (PCS) system, policy clarifications and updates, and slides and audio recordings of SNP trainings.
PCS	Send any questions about interpretation of the Structure & Process measures through the PCS system on the NCQA Web site at http://ncqa.force.com/pcs/login
FAQs	FAQs are available on the SNP page of NCQA's Web site http://www.ncqa.org/snp

Recommended Supporting Documents

Ensure that your documents, policies, procedures, reports and materials address all aspects of each factor and element. The following is a list of documents recommended to attach as evidence of performance so the NCQA surveyor may complete the evaluation of your SNP plan against the Structure & Process measures. The list is not intended to be all-inclusive or prescriptive.

Measure	Documents*
SPECIAL NEEDS PLANS	
SNP 1	For Element A (New Element), a program description or policies and procedures that detail how the organization's care management program is structured. These documents also identify the evidence it used to develop the program, along with the services it provides and program goals. For Element B (New Element), policies and procedures that detail how the SNP: 1) assesses the characteristics of the population in the care management program, 2) reviews and updates care management processes and 3) reviews and updates resources to address members' needs. For Element C (Previously Element F), policies and procedures and reports or materials are required. These documents must show the organization has procedures and how it conducts an initial assessment of each member that enables it to obtain eight specific types of information that address each factor in the element. For Element D (Previously Element G), policies and procedures, reports or materials that detail how the SNP develops individualized care plans for members that address the five required factors. For Element E (Previously Element I), reports containing an analysis of a care management satisfaction survey, complaints and inquiries. For Element F (Previously Element J), reports showing the analysis of three relevant measures to assess the effectiveness of the care management program. For Element G (Previously Element K), reports showing interventions implemented and policies that describe plans for assessing intervention effectiveness and remeasurement.
SNP 2	For Elements A and B: ▪ Reports demonstrating an **evaluation** of member complaint and appeal data (including how the population was identified, sampling methodology and collection of valid data).

	▪ Reports showing an **organization's analysis** of CAHPS results and opportunities for improvement it identified if used. ▪ Reports demonstrating identification of opportunities for improvement. For Element C, reports showing intervention implemented and the evaluation of the intervention effectiveness. **Organizations with no members at the start of the look-back period may select not applicable (N/A); however, you must provide information to support the N/A claim and NCQA will verify with the April 2013 CMS Comprehensive Report.**
SNP 3	SNPs do not need to supply any documentation for this element; NCQA staff will review HEDIS results submitted previously. **Organizations with less than 30 members per the February 2012 CMS Comprehensive Report will receive a score of not applicable (N/A).**
SNP 4* ***Please note that two data sources (e.g., documented processes and reports/materials) are required for each factor of every element in SNP 4.**	▪ (Element A) Policies and procedures detailing the organization's process for identifying and managing planned/unplanned transitions between care settings which include **timeframes for specified activities**. Policies and procedures with specified timeframes that show how the SNP notifies the member's usual practitioner of a transition. ▪ (Element B) Procedures with specified timeframes that demonstrate: --how the SNP communicates changes in members' conditions to member and or responsible party; and --how the SNP educates member and/or responsible party regarding the transition process. ▪ (Element C) Reports demonstrating **aggregate analysis of performance managing transition tasks** ▪ (Element D) Policies and procedures for reporting by contracted entities ▪ (Element D) Reports on daily admissions or staff notification of transitions ▪ **(Element E) Reports detailing an analysis of admissions and ER visits which indicates** -- how the SNP implements an intervention to reduce unplanned transitions

	Elements C and E require documented processes and reports. **For Elements C and E, SNPs with no members at the start of the look-back period may select not applicable (N/A); however, you must provide information to support the N/A claim and NCQA will verify with the April 2013 CMS Comprehensive Report.** ▪ (Element F) Policies and procedures for case managers or other staff to contact members at-risk for a transition and arrange services.
SNP 5	▪ (Element A) Policies and procedures that demonstrate: --how the SNP receives updates from facilities on members care and monitors their health ▪ (Element B) Procedures delineating how: 1) the organization and facilities respond to changes in members' health status and triggering events; and 2) the member's care is coordinated with appropriate clinicians or care plan. ▪ (Elements A and B) Contracts or agreements with facilities covering their reporting responsibilities ▪ (Elements A and B) Reports (such as MDS) or materials of how member health status data is collected ▪ (Elements A and B) Job descriptions of staff that visit members and reports they provide on changes in members' health status ▪ (Elements A and B) Briefing materials distributed by facilities. ▪ (Element C) Screenshots of the care management system showing monitoring, assessments and care plan changes after a member's health status change along with discussions between nurse managers and treating practitioners regarding them. Elements 5A, 5B and 5C are not applicable (N/A) for Institutional SNPs that do not have any contracts with nursing or assisted living facilities and for Chronic condition and Dual-eligible benefit packages.
SNP 6	▪ (Element A) Reports that demonstrate how the SNP coordinates Medicaid and Medicare benefits and services ▪ (Element A) Evidence of coverage documents ▪ (Element B) Procedures and reports used to determine Medicaid eligibility and changes in members' Medicaid eligibility.

	▪ (Elements B and C) Instructional materials distributed to members or responsible parties on where to reapply for Medicaid. ▪ (Elements B and C) Job descriptions, procedures and scripts used by staff that assist members with information on Medicare and Medicaid: eligibility, benefits and claims ▪ (Element C) Procedures for administering Medicaid benefits; and acknowledgment of receipt of instructional materials from state on how to administer Medicaid benefits. ▪ (Element D) Policies and procedures for arranging services for members along with provider directories, provider manuals. ▪ (Element E) Policies containing standards for the numeric and geographical distribution of practitioners and providers as well as the methodology used to assess network adequacy; reports showing an evaluation of network adequacy for practitioners and providers that accept members' Medicare and Medicaid benefits. **Elements 6A and 6B are not applicable (N/A) for Chronic condition and Institutional benefit packages.** **An organization that does not have a contract with the state to adjudicate Medicaid claims can meet the intent of Element 6B factor 2 by providing a documented process and reports/materials that show it helps members understand the states' adjudication of claims submitted by providers.** **Element 6C is not applicable (N/A) for all Dual Eligible SNPs and Chronic and Institutional SNPs with fewer than 5% dual-eligible members; however, Chronic and Institutional SNPs must provide documentation to support the N/A claim and NCQA will verify with enrollment data from CMS.** **Elements 6D and 6E are not applicable (N/A) for Chronic condition and Institutional SNPs with fewer than 5% dual-eligible members are not required to report; however, you must provide documentation to support the N/A claim and NCQA will verify with enrollment data from CMS.**

For security reasons, including the protection of the data and documents you send to us, we limit the types of documents you may send. The permitted file types are .CSV, .DOC, .DOCX, .GIF, .JPG, .MPP, .PDF, .PPT, .PPTX, .RTF, .TXT, .VSD, .XLS, and .XLSX. We cannot accept files in other formats. Please note that most other formats can be converted to .GIF, or .JPG via scanner, or to PDF using Adobe® Acrobat®.

**** Please do not attach documents that contain Protected Health Information (PHI) to the survey tool.**

Preparing Documentation for Surveys

Preparing Documentation for Surveys

An important part of any NCQA survey is document preparation. NCQA determines if an organization meets an element or factor based on what the organization's documents – such as policies, program descriptions, activity reports, member materials, and other work products – demonstrate. The documents show what you as an organization ***do.***

How you prepare those documents and present them to NCQA, in other words, how you tell your story, can make it easier for the NCQA survey team to confirm that you meet the requirements. This can result in a simpler and more streamlined survey experience, with fewer requests from the survey team for clarification or additional information during Plan Comment. Your objective should be to provide the NCQA survey team with the information necessary to accurately evaluate performance against the Structure and Process (S&P) measures in as directed and efficient a manner as possible.

Keep in mind that the goal of the surveyor is to confirm that your organization meets the intent of the requirements; therefore, the clearer it is that it has met the intent; the easier it is for the surveyor to confirm the organization's performance. ***However, the organization is ultimately responsible for documenting its performance and directing the surveyor to that documentation.***

The purpose of this document is to provide direction on preparing documents and developing a **documentation guide,** which helps the surveyor navigate through the information attached to your survey tool.

It has three sections:

- **How the S&P Measures are Structured:** This section provides an overview of the components of a measure and its elements, with an emphasis on how to determine what documentation is needed

- **Document Preparation:** This section describes how to prepare documents, with suggestions on how to compile information, highlight key sections in documents and direct surveyors to the specific information that demonstrates you meet an element. It also explains how NCQA will handle situations where it cannot find evidence of performance in the documentation – either because it does not appear to be there or because the documents are not presented in a manner that makes it easy to find.

- **Documentation Guide:** This section provides an overview of what a documentation guide is and how it assists NCQA in the review of your documents. It also provides examples of how to compose a documentation guide.

How the S&P Measures are Structured

In order to know what type of information and documentation to provide to the survey team, it is important to understand how the measures are structured. Each S&P measure includes the following key information:

- **Standard Statement:** An actual statement that describes acceptable performance or results.

- **Intent Statement:** The statement that describes the importance, purpose and meaning of the measure.

- **Element:** The component of a measure that is scored and provides details about performance expectations. NCQA evaluates each element within a measure to determine the degree to which the organization meets the requirements within the measure.

- **Factor:** An item within an element that is scored. For example, an element may require the organization to demonstrate that a specific document addresses four items; each item is a factor.

- **Data Source:** the types of documentation or evidence that the organization must use to demonstrate performance with an element. NCQA defines four types of data sources, however, for the SNP S&P measures assessment, NCQA does not currently require records/files:

  1. **Documented process:** Policies and procedures, process flow charts, protocols and other mechanisms that describe an actual process used by the organization.

  2. **Reports:** Aggregated sources of evidence of action or performance with an element, including program evaluation management reports; key indicator reports; summary reports from member reviews; system output giving information like number of member appeals; minutes; and other documentation of actions that the organization has taken.

  3. **Materials:** Prepared materials or content that the organization provides to its members or practitioners including written and electronic communication, information from Web sites, scripts, brochures, newsletters and clinical guidelines.

  4. **Records or Files:** Actual records or files that show direct evidence of action or performance with an element.

  If multiple data sources are listed for an element, the explanation section provides direction on what evidence the organization must provide to meet the requirements.

- **Scope of Review:** The extent of the organization's services evaluated during an NCQA survey.

- **Look-back Period:** The period of time for which NCQA evaluates an organization's documentation to assess performance against an element. NCQA measures the look-back period from the point of the organization's submission of the completed Survey

Tool. Unless otherwise noted, organizations must meet the requirement throughout the look-back period.

- **Explanation:** Specific requirements that the organization must meet, and guidance for demonstrating performance against the element.

- **Examples:** Descriptive information illustrating performance against an element's requirements. Examples are provided for guidance only and are not specifically required or all-inclusive.

Be sure to consider all pertinent information provided by NCQA under each measure and element in the Survey Tool (e.g., each of the information sources described in the section above). If the data source specifies "documented process" and the organization provides a report, it has not demonstrated full performance. Likewise, if the look-back period specifies 6 months, and the organization provides evidence of completion of the activities that is dated 12 months prior to the survey date, then it has not demonstrated performance with the requirements.

Document Preparation

NCQA surveyors serve as fact finders for organizations, verifying that that the documentation presented meets the intent of the requirements.

The organization's obligation is to present the documentation that demonstrates performance and to do so in a manner that facilitates review by the NCQA survey team. The organization is expected to:

- Provide the required documents

- Present them in an organized, readable format

- Limit documentation to the minimum necessary to demonstrate performance

- Use available software features and tools (such as highlighting and comments) to direct the surveyors to evidence of performance.

If the surveyors do not find the specified evidence in the documents, they will ask for clarification during Plan Comment and provide the organization an opportunity to respond. The survey team does not summarily score an element less than 100 percent without notification to the organization of the issues.

When an organization provides numerous documents, clear evidence of performance may not be obvious or apparent to the surveyor.

However, the onus is on the organization to demonstrate its performance with each of the requirements.

What is the Best Way to Prepare Documentation for the Survey Team?

It is important that organizations prepare documents in a manner for the survey team to review them efficiently. NCQA **requires** that you do the following:

- Reference the specific page number(s) and paragraph to which you want to draw the surveyor's attention.

- Designate each document as "primary" or "secondary" in the ISS Survey Tool. If you are considering using the "Supporting" designation, NCQA encourages the organization to consider if the document is truly necessary to demonstrate it meets the intent of the requirement.

NCQA **strongly suggests** that organizations use the following tools available in common software to prepare the documentation for the survey team.

- Highlight or underline the key text in the document to draw the surveyor's attention to the sections that demonstrate performance.

- Convert multiple documents into one document in .pdf format and create "hyperlinks" or "bookmarks" in the document that automatically take the surveyor to highlighted text.

- Use "add comment" tools to note the element and (if applicable) factor to which the highlighted section applies.

- For very large documents, provide only the necessary pages; the cover page and any other pages that contain necessary dates. NCQA strongly encourages that you use either scanned copies or Adobe PDF, which allows you to extract pages from large documents while retaining the integrity of the page layout.

- Name the document in a manner that helps the surveyor understand why it is relevant. The name should be as specific as possible.

    - Where possible, name the document according to the specific measure, element or factor(s) it supports. This may not be possible when you use the same document for multiple elements/factors.

    - Alternatively, use a name that conveys what the document contains or means.

Both word processing programs (such as MS Word) and Adobe PDF support these features.

How Much Documentation is Enough… or Too Much?

Carefully read the information and explanation contained under each element in the survey tool, taking into account the data source(s) and the look-back period.

- Each element must have supporting documentation.

- If an element is not applicable to your organization please supply supporting documentation and an explanation in the "support text/notes" box for the element.

Documentation that is “supplementary in nature” may make the survey process more complex than desired. **Organizations should apply a philosophy of *minimum necessary information* when preparing documentation.** Surveyors will seek additional information when they do not find evidence of performance in the documents presented.

Documentation Guide

A documentation guide is simply a **concise document that describes "how" your organization meets the requirements of the specific element/factor.** This guide helps the NCQA survey team to best understand your organization's processes and documentation within the context of the specific NCQA requirement.

Methods for Including Documentation Guides

The following are two ***examples*** of methods that may be used:

1. Prepare the documentation guide in a word or PDF document and load it under the respective element in the survey tool. You can prepare one document for each measure, addressing all the elements in the measure in that document. If this method is used, NCQA suggests that you name your documentation guide specific to the measure and element that it supports (e.g. "*Documentation Guide for SNP 1") or* use a name that conveys what the document contains**.**

2. Incorporate the section of the documentation guide in the support text/notes box for each respective element in the survey tool.

Format for a Documentation Guide
NCQA is not prescriptive regarding the format for the documentation guide; however, some general recommendations are provided below:

- Specify "how" the documentation supplied demonstrates performance with the requirements of the element or factor. Because your organization is familiar with its own processes, it may seem apparent how documents demonstrate performance within the context of the element or factor. However, the surveyor has limited familiarity with an organization's operational processes; and therefore, it is important to provide a foundation for how the documentation supplied meets the performance requirements of the specific element or factors.

- Documentation guides are especially helpful when you need to provide more than one document. If more than one document is necessary, incorporate information (in the ISS "support text/notes" field or in a summary document, explaining how the documents relate to each other.

    - If the organization supplies numerous documents without an explanation, it is difficult for the surveyor to synthesize how the documents together may demonstrate it meets the intent of the element or factors.

    - Reference the key documents that demonstrate your organization's performance with the specific element and/or factors. Please remember to specify the document and specific pages or sections that contain this evidence.

- The documentation guide does not have to be lengthy – just a concise description of how the organization meets the specific requirements of the element and/or factors.

A few examples are provided below for guidance only.

Example 1: Documentation Guide for SNP 4, Element D (2013 S&P Measures):

The organization identifies transitions by reviewing the following for facilities in its network:

1. Reports of hospital admissions within one business day of admission
2. Reports of admissions to long-term care facilities within one business day of admission.

In 2012, Smart Health Plan (SHP) incorporated language in its provider contracts requiring acute care hospitals, SNFs and long-term acute care facilities to notify it of an unplanned admission within 24 hours.

In addition to excerpts from the contract, SHP has supplied evidence consisting of a policy for its staff to download and review daily census reports and three of these reports containing information on unplanned admissions to acute and long-term care for the month.

For factors 1 and 2 of SNP 4 Element D, please see the attached PDF document named "2013 SNP 4 Element D" with bookmarks leading to a copy of:

- Section 3 of the provider contract containing the specified information, along with the first page of the contract showing the facility's name and a page containing specified language and the signature page for both entities.
- Section 2 of Policy #2389 "Facilitating Transition Support for Unplanned Admissions", which describes how case managers and care coordinators download and review daily census reports each business day containing information on unplanned admissions to acute care and long-term care facilities from its UM system. These staff members subsequently use this information to contact members to address their care coordination needs.
- Three daily census reports showing the effective and notification dates for unplanned admissions to acute and long-term care facilities within the months of May, June and July 2013.

Key points about this example:

- The organization has addressed all key requirements of this element in the documentation guide.
- The organization addressed both data sources for this element: documented process and reports. NCQA requires the organization to supply its written procedures and evidence of implementation (e.g., the explanation for this element specifies that three reports must be provided for hospitals and long-term care facilities).

Example 2: Documentation Guide for SNP 4 Element C (2013 S&P Measures)

The organization analyzes its performance on managing care transitions:

1. For all transitions, conducting an analysis annually of its aggregate performance: identifying that a planned transition is going to occur; sharing the sending setting's care plan with the receiving setting within one business day of notification of planned and unplanned transitions; and notifying the member's usual practitioner of planned and unplanned transitions within a specified timeframe.

2. Drawing appropriate samples from the affected population for the transitions specified in factor 1, if a sample is used.

3. For all transitions, conducting an analysis annually of its aggregate performance: communicating with the member or responsible party about the care transition process within a specified timeframe; communicating with the member or responsible party about changes to the member's health status and plan of care within a specified timeframe; and providing each member who experiences a transition with a consistent person or unit within the organization who is responsible for supporting the member through transitions between any points in the system within a specified timeframe.

4. *Drawing appropriate samples from the affected population for the transitions specified in factor 3, if a sample is used.*

In 2012, Star Health Plan completed the implementation of tools, procedures and training for providers and multidisciplinary care team members to conduct analyses of its care transition activities. Its tools consisted of audits of data generated from a Patient Transfer Form developed by a state patient safety task force. This task force included substantial representation from major hospital systems, health plans and providers.

To demonstrate its performance with factors 1 through 4 of SNP Element C, Star Health Plan incorporated the following into one comprehensive overarching document:

- A report containing an analysis of a sample of care transitions for the first six months of 2013 (based on data from the audit)—pages 1-4;
- Care Transition Management Policy CTM 0.50 which describes the plan's processes for performing the transition management activities for SNP 4 Elements A and B and the subsequent analysis for Element C—pages 5-8;
- Star Health Plan's audit procedures accompanied two completed audit tools--one for factors 1 and 2 of SNP 4 Element A and second one for factor 3 of SNP 4 Element A and factors 1 through 3 of Element B—pages 9-12; and
- A copy of the Patient Transfer Form Star Health Plan and its providers use for member transfers from one care setting to another—page 13.

Key points about this example:

- The organization has addressed all key requirements of this element in the documentation guide above.
- The organization provided a documented process, reports and some additional evidence to support the requirements specified in the explanation e.g., the sampling methodology and data collected.
- The organization notified the surveyor where the specific documents can be found. This makes the review process more efficient for the surveyor when lengthy, detailed or numerous documents must be reviewed.

Are Documentation Guides Required?

The necessity of a documentation guide will vary based on the element and also on the degree to which the organization make use of other tools (roadmaps, bookmarking, highlighting, and comments) to present a coherent story. The following are examples of two elements where the need for a documentation guide differs:

- **SNP 1, Element E factor 1 (Satisfaction With Care Management-obtaining feedback from members)** requires a report showing the organization obtains feedback from its members in the care management program. Because this is a straightforward requirement – and a report is the only required data source to demonstrate performance, it may not be necessary for the organization to provide any additional information regarding its documentation.

- **SNP 1, Element F (Analyzing Effectiveness/Identifying Opportunities)** requires the organization to demonstrate that it has used three measures to assess the effectiveness of its care management program and identified opportunities for improvement. This may require several documents for each of the three identified opportunities. Using a documentation guide, the organization can provides additional background on the measures, or "tell its story" and can explain how the multiple documents relate to each other and in what order they should be reviewed.

Bookmarking, effective highlighting and comments can eliminate the need for a documentation guide for many elements.

Steps and Screenshots for Key Activities

Steps and Screenshots for Key Activities

This section of the toolkit summarizes and illustrates steps and information organizations can use to perform certain activities in their ISS survey tools. It provides a quick reference for: logging into survey tools, changing passwords, loading documents to the library and conducting completeness checks. **Please consult the *Interactive Survey System User's Manual* in ISS for complete instructions and details on all ISS survey tool functions.**

Getting started: NCQA gives the Administrator for each SNP a temporary user ID and password which prompts the user to change the password the first time it is used. Administrators should store their password in a safe place since they can grant up to 3 additional users access to the organization's survey tools.

1) Go to https://iss.ncqa.org (you may want to bookmark this page)
2) Enter the user ID and password (passwords are case sensitive)
3) Click log-in
4) Accept the license agreement (access is not permitted if you do not accept)
5) Welcome page (picture of Margaret O'Kane)
6) Administrators may manage users via *Administrative Functions* or *Change User Password* *(screenshots 1A and 1B)* (see full instructions in User Manual)
7) Select the appropriate survey tool by clicking on 2013 SNP S&P link to enter the tool *(screenshot 2A)*
8) Click on the Help and Instructions tab for complete instructions or a Users' Manual *(screenshot 3A)*
9) On Navigation Bar, click Organization Background tab and complete *(screenshot 4A)*
10) You must set up your survey tool by selecting the appropriate SNP type before you can work in ISS. Setting up your survey tool: (a) Click Set-up Survey Tool followed by Select Evaluation Options *(screenshot 5A)* (c) Select returning or new SNP; (d) Select for Readiness Evaluation; (e) click Save; (f) close window to return to SNP page *(screenshot 5B)*
11) Click Survey Tool to return to SNP page
    - Top Navigation Bar includes ISS functions
    - Blue Navigation Bar includes contents of the S&P measures
12) Click the Special Needs Plans Tab then select the measure or element to begin readiness evaluation *(screenshots 6A and 6B)*
13) You can load a document in ISS by going into the Document Library or directly from an element; however the following instructions are for adding documents from the Document Library.
    To load documents: (a) click Document Library; (b) click Load Document to the Library, a form appears that contains fields you must complete entitled Document name and Document file path; (c) use the Browse button to launch a file "look-in" prompt of your local drives; (d) locate the document and select it using the Open button located on the

file “look-in” prompt; (e) scroll over the name of the document – not the entire path; (f) copy and paste the name of the document into the Document name field; (g) click Save or Save and attach more documents. *(screenshots 7A, 7B and 7C)*

14) Remember to link documents to the appropriate element(s) in the Document library. Linking a document to an element: (a) Click Add Link to link documents; (b) enter the page number(s) in Reference Pages; (c) select the Relevance level from the available options; (d) select the element to which you want to link the document to; and (e) click Save and Close or click Save and Link More Elements if you would like to link this document to more elements. *(screenshots 7D and 7E).*
To link another new document to an element repeat steps (a) through (e).

Tip: Always logout when you are finished working on your ISS tool *(screenshot 8A)*

15) Perform a completeness check before you submit your survey tool.
To check completeness: *(screenshot 9A and 9B)*
(a) Click Survey Tool followed by Utilities; (b) Select the Completeness check link; (c) Review the Elements That Are Not Complete; (d) double check each element and complete all that are listed as incomplete.

16) To submit survey tool(s): After you have confirmed all information in the survey tool is accurate and you are ready to submit, a) Click on Set-up the Survey Tool followed by Select Evaluation Options; (b) Mark the checkbox for your SNP type under “Select to Submit for Survey” and save *(screenshots 10A and 10B)*; (c) click on the Submit Survey Tool link on the Top Navigation Bar *(screenshots 10C and 10D);* and (b) confirm that you are ready to submit your final Survey Tool. **This is the last chance you have to cancel the final submission of your Survey Tool**. (c) Click ok to submit your Survey Tool for survey. Once submitted, you will receive a confirmation and have access to a "read only" copy of your submitted Survey Tool *(screenshots 10E and 10F)*. Please note: once you have successfully submitted, you will receive a project number for that survey tool on the completed submission page *(screenshot 10F)*. Please save this number. You will use it to verify you are viewing the correct final survey tool results once NCQA finalizes the scoring and notifies you of the results. Alternatively, if you receive an error message that indicates your organization applied for a different evaluation option than the one identified in the survey tool, please check and make sure that you selected the appropriate evaluation option for a returning or new SNP *(screenshot 10G).*

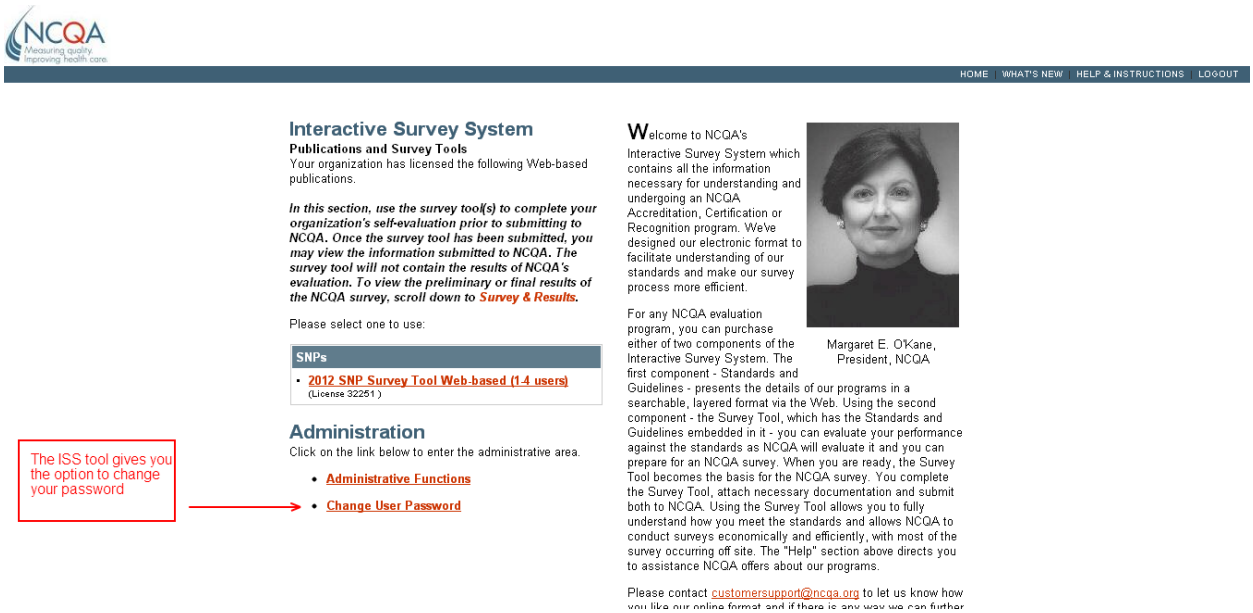
17) Reviewing your results after NCQA completes the assessment

After you receive notification from NCQA that the SNP Assessment is complete and your results are available, log on to NCQA’s ISS (https://iss.ncqa.org/RDSat/ATLogin.asp) with your original User ID and password *(screenshot 11A)*. If you cannot remember your password, but still have your User ID, click on the hypertext on the log in page that says, “If you have forgotten your Password, enter your User ID above and **click here**.” Your password will then be emailed to you.

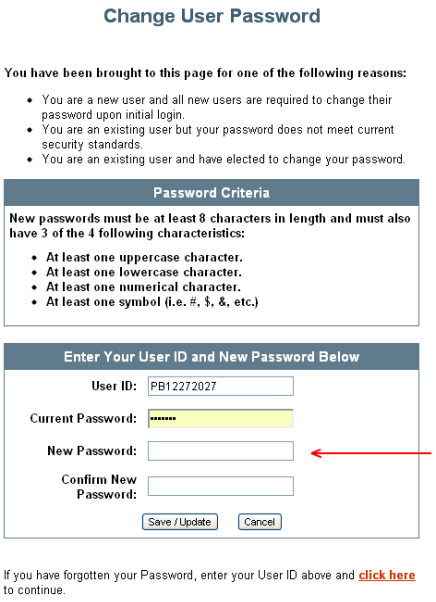
Once on the main ISS home page, please select the “Survey and Results” tab for each

survey tool which should have a project number listed directly below it *(screenshot 11B)*. Open the survey tool(s) click the “results” tab, agree to the statement regarding results and click on the red link for Special Needs Plans; this will provide the score for each element *(screenshots 11C -11F*). You should also go directly into the survey tool and view each element. If your tool has elements with scores less than 100%, click the “Support Text/Notes” tab at the bottom of the element for an explanation of the score.

Screenshot 1A
Change password

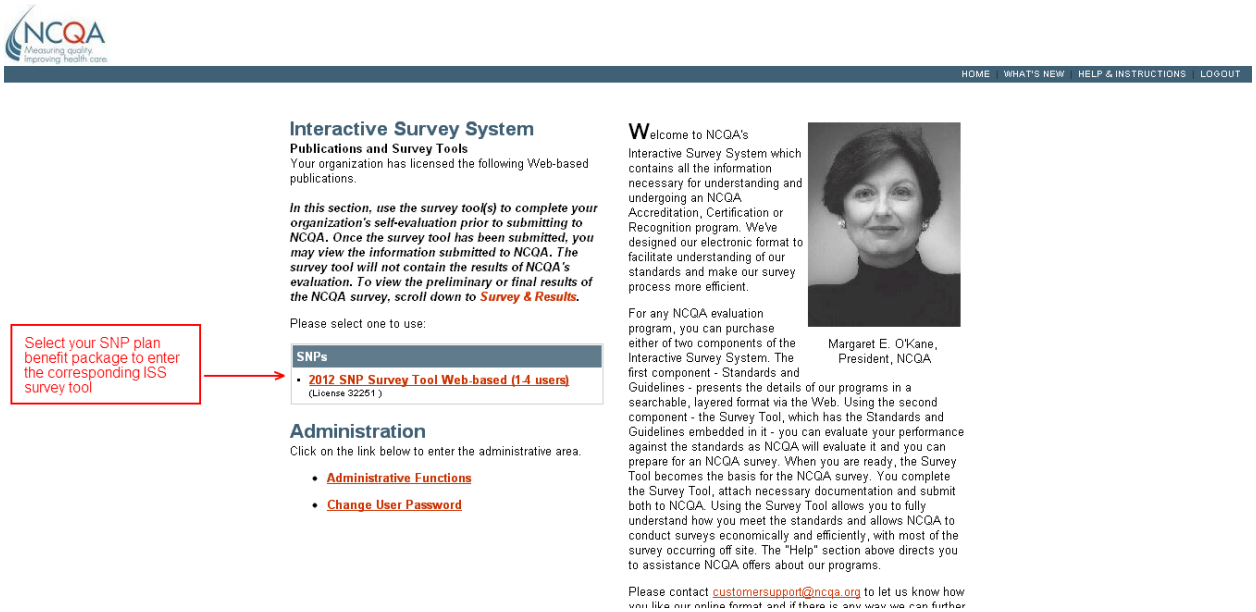

NCQA
Measuring quality. Improving health care.
HOME | WHAT'S NEW | HELP & INSTRUCTIONS | LOGOUT
Interactive Survey System
Publications and Survey Tools
Your organization has licensed the following Web-based publications.
In this section, use the survey tool(s) to complete your organization's self-evaluation prior to submitting to NCQA. Once the survey tool has been submitted, you may view the information submitted to NCQA. The survey tool will not contain the results of NCQA's evaluation. To view the preliminary or final results of the NCQA survey, scroll down to Survey & Results.
Please select one to use:
SNPs
2012 SNP Survey Tool Web-based (14 users)
(License 32251)
Administration
Click on the link below to enter the administrative area.
Administrative Functions
Change User Password
Welcome to NCQA's Interactive Survey System which contains all the information necessary for understanding and undergoing an NCQA Accreditation, Certification or Recognition program. We've designed our electronic format to facilitate understanding of our standards and make our survey process more efficient.
Margaret E. O'Kane, President, NCQA
For any NCQA evaluation program, you can purchase either of two components of the Interactive Survey System. The first component - Standards and Guidelines - presents the details of our programs in a searchable, layered format via the Web. Using the second component - the Survey Tool, which has the Standards and Guidelines embedded in it - you can evaluate your performance against the standards as NCQA will evaluate it and you can prepare for an NCQA survey. When you are ready, the Survey Tool becomes the basis for the NCQA survey. You complete the Survey Tool, attach necessary documentation and submit both to NCQA. Using the Survey Tool allows you to fully understand how you meet the standards and allows NCQA to conduct surveys economically and efficiently, with most of the survey occurring off site. The "Help" section above directs you to assistance NCQA offers about our programs.
Please contact customersupport@ncqa.org to let us know how
The ISS tool gives you the option to change your password

Screenshot 1B
Change password


Change User Password
You have been brought to this page for one of the following reasons:
You are a new user and all new users are required to change their password upon initial login.
You are an existing user but your password does not meet current security standards.
You are an existing user and have elected to change your password.
Password Criteria
New passwords must be at least 8 characters in length and must also have 3 of the 4 following characteristics:
At least one uppercase character.
At least one lowercase character.
At least one numerical character.
At least one symbol (i.e. #, $, &, etc.)
Enter Your User ID and New Password Below
User ID:
PB12272027
Current Password:
New Password:
Confirm New Password:
Save / Update
Cancel
If you have forgotten your Password, enter your User ID above and click here to continue.

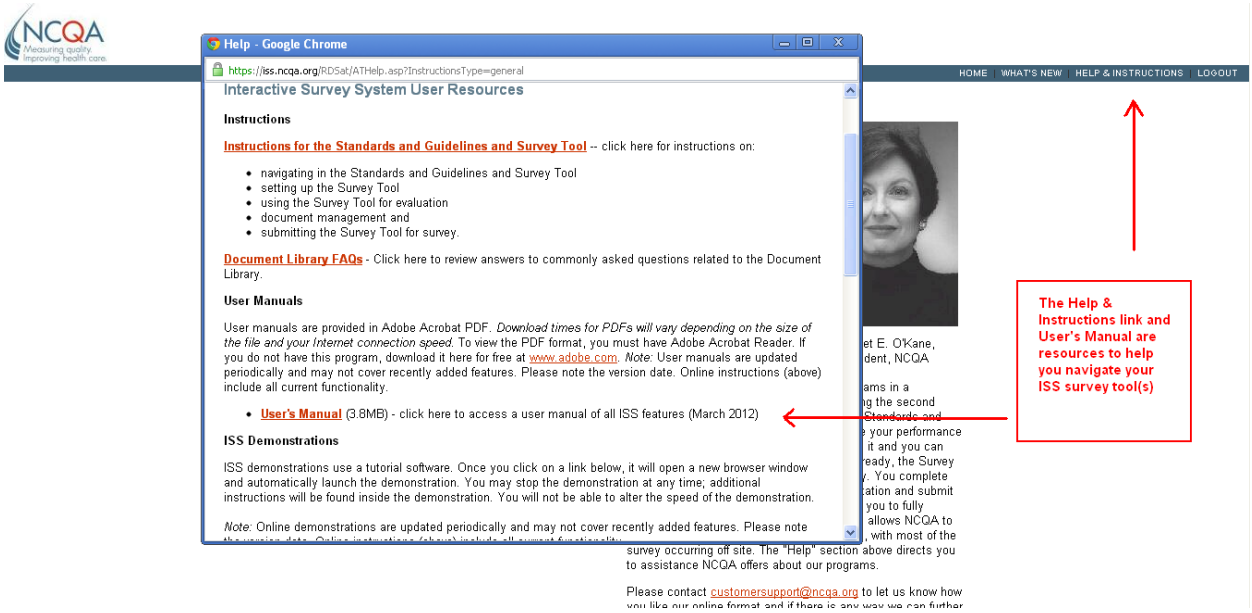
Screenshot 2A

Welcome page – select your survey tool

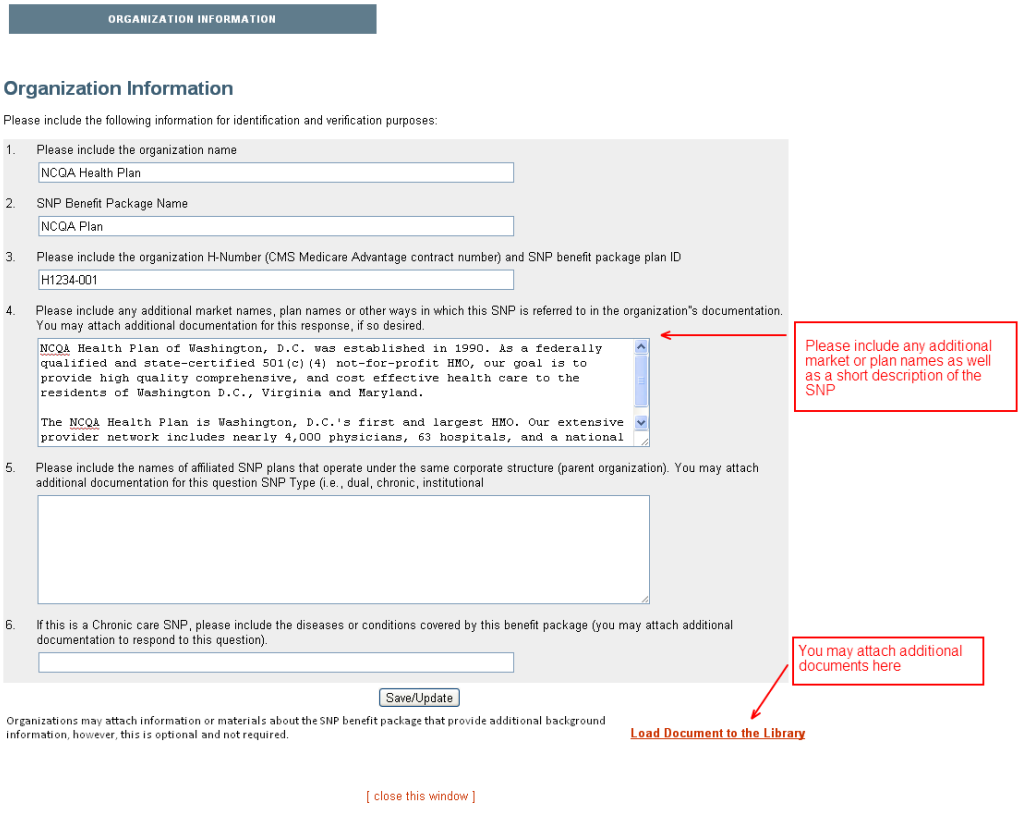

HOME | WHAT'S NEW | HELP & INSTRUCTIONS | LOGOUT
Interactive Survey System
Publications and Survey Tools
Your organization has licensed the following Web-based publications.
In this section, use the survey tool(s) to complete your organization's self-evaluation prior to submitting to NCQA. Once the survey tool has been submitted, you may view the information submitted to NCQA. The survey tool will not contain the results of NCQA's evaluation. To view the preliminary or final results of the NCQA survey, scroll down to Survey & Results.
Please select one to use:
Select your SNP plan benefit package to enter the corresponding ISS survey tool
SNPs
2012 SNP Survey Tool Web-based (14 users)
(License 32251)
Administration
Click on the link below to enter the administrative area.
Administrative Functions
Change User Password
Welcome to NCQA's Interactive Survey System which contains all the information necessary for understanding and undergoing an NCQA Accreditation, Certification or Recognition program. We've designed our electronic format to facilitate understanding of our standards and make our survey process more efficient.
Margaret E. O'Kane, President, NCQA
For any NCQA evaluation program, you can purchase either of two components of the Interactive Survey System. The first component - Standards and Guidelines - presents the details of our programs in a searchable, layered format via the Web. Using the second component - the Survey Tool, which has the Standards and Guidelines embedded in it - you can evaluate your performance against the standards as NCQA will evaluate it and you can prepare for an NCQA survey. When you are ready, the Survey Tool becomes the basis for the NCQA survey. You complete the Survey Tool, attach necessary documentation and submit both to NCQA. Using the Survey Tool allows you to fully understand how you meet the standards and allows NCQA to conduct surveys economically and efficiently, with most of the survey occurring off site. The "Help" section above directs you to assistance NCQA offers about our programs.
Please contact customersupport@ncqa.org to let us know how

Screenshot 3A

Help & Instructions and User's Manual

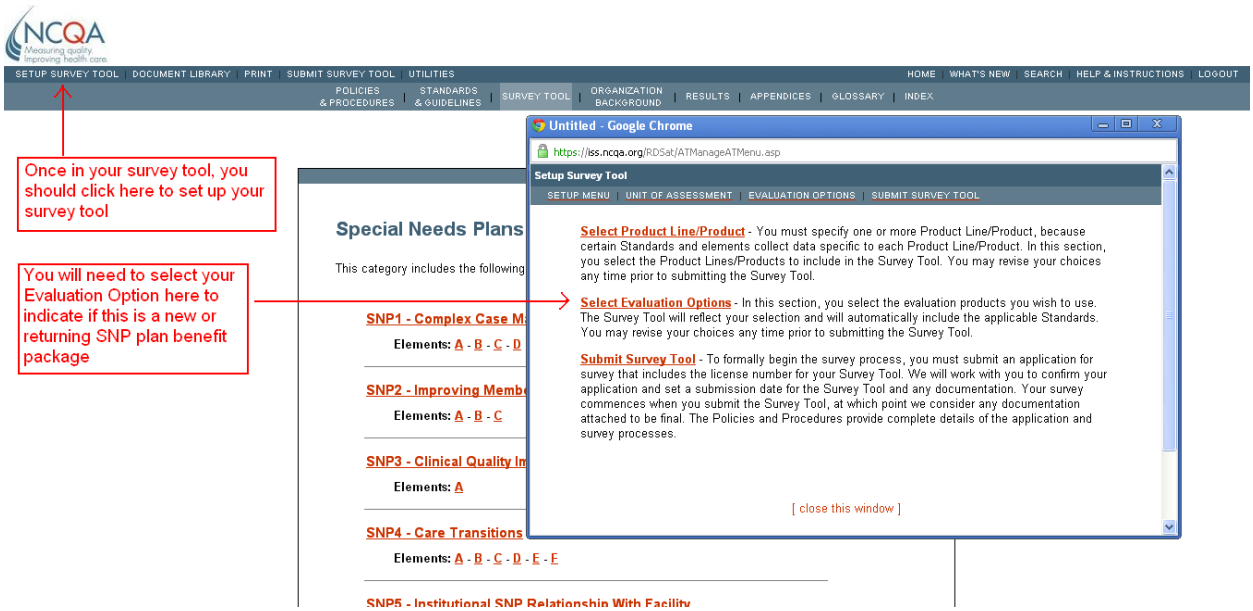

HOME | WHAT'S NEW | HELP & INSTRUCTIONS | LOGOUT
Help - Google Chrome
https://iss.ncqa.org/RDSat/ATHelp.asp?InstructionsType=general
Interactive Survey System User Resources
Instructions
Instructions for the Standards and Guidelines and Survey Tool -- click here for instructions on:
navigating in the Standards and Guidelines and Survey Tool
setting up the Survey Tool
using the Survey Tool for evaluation
document management and
submitting the Survey Tool for survey.
Document Library FAQs - Click here to review answers to commonly asked questions related to the Document Library.
User Manuals
User manuals are provided in Adobe Acrobat PDF. Download times for PDFs will vary depending on the size of the file and your Internet connection speed. To view the PDF format, you must have Adobe Acrobat Reader. If you do not have this program, download it here for free at www.adobe.com. Note: User manuals are updated periodically and may not cover recently added features. Please note the version date. Online instructions (above) include all current functionality.
User's Manual (3.8MB) - click here to access a user manual of all ISS features (March 2012)
ISS Demonstrations
ISS demonstrations use a tutorial software. Once you click on a link below, it will open a new browser window and automatically launch the demonstration. You may stop the demonstration at any time; additional instructions will be found inside the demonstration. You will not be able to alter the speed of the demonstration.
Note: Online demonstrations are updated periodically and may not cover recently added features. Please note
The Help & Instructions link and User's Manual are resources to help you navigate your ISS survey tool(s)

Screenshot 4A
Organization Information


ORGANIZATION INFORMATION
Organization Information
Please include the following information for identification and verification purposes:
1. Please include the organization name
NCQA Health Plan
2. SNP Benefit Package Name
NCQA Plan
3. Please include the organization H-Number (CMS Medicare Advantage contract number) and SNP benefit package plan ID
H1234-001
4. Please include any additional market names, plan names or other ways in which this SNP is referred to in the organization"s documentation. You may attach additional documentation for this response, if so desired.
NCQA Health Plan of Washington, D.C. was established in 1990. As a federally qualified and state-certified 501(c)(4) not-for-profit HMO, our goal is to provide high quality comprehensive, and cost effective health care to the residents of Washington D.C., Virginia and Maryland.
The NCQA Health Plan is Washington, D.C.'s first and largest HMO. Our extensive provider network includes nearly 4,000 physicians, 63 hospitals, and a national
Please include any additional market or plan names as well as a short description of the SNP
5. Please include the names of affiliated SNP plans that operate under the same corporate structure (parent organization). You may attach additional documentation for this question SNP Type (i.e., dual, chronic, institutional
6. If this is a Chronic care SNP, please include the diseases or conditions covered by this benefit package (you may attach additional documentation to respond to this question).
Save/Update
Organizations may attach information or materials about the SNP benefit package that provide additional background information, however, this is optional and not required.
Load Document to the Library
You may attach additional documents here
[close this window]
© 2002 – 2012 by National Committee for Quality Assurance, Patent Pending
Use of this Web site/application constitutes acceptance of the License Agreement and Privacy Policy

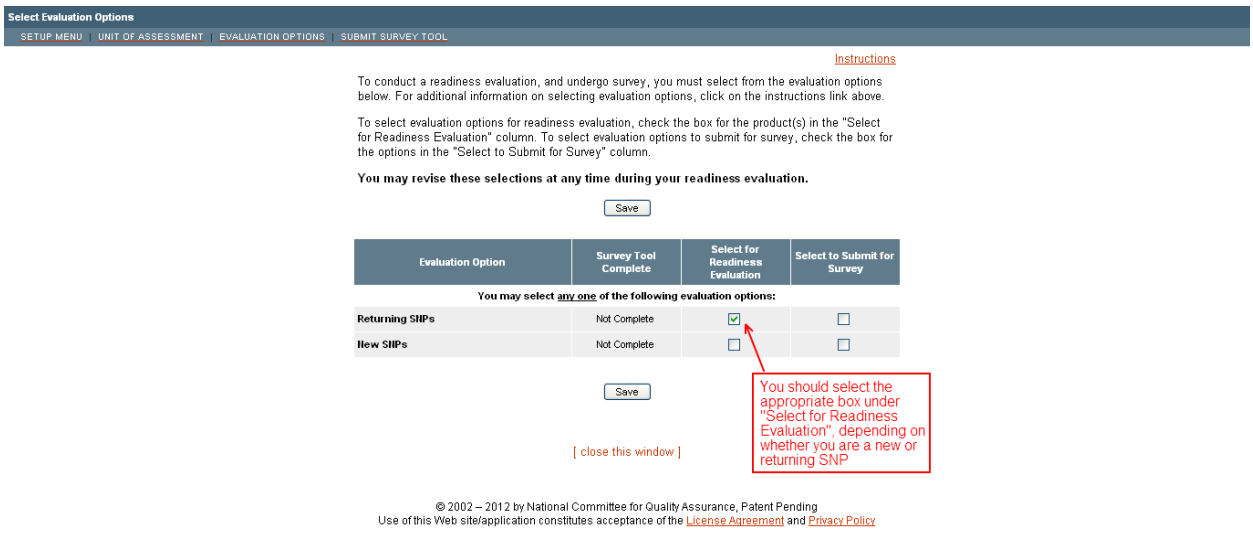
Screenshot 5A

Set-up survey tool

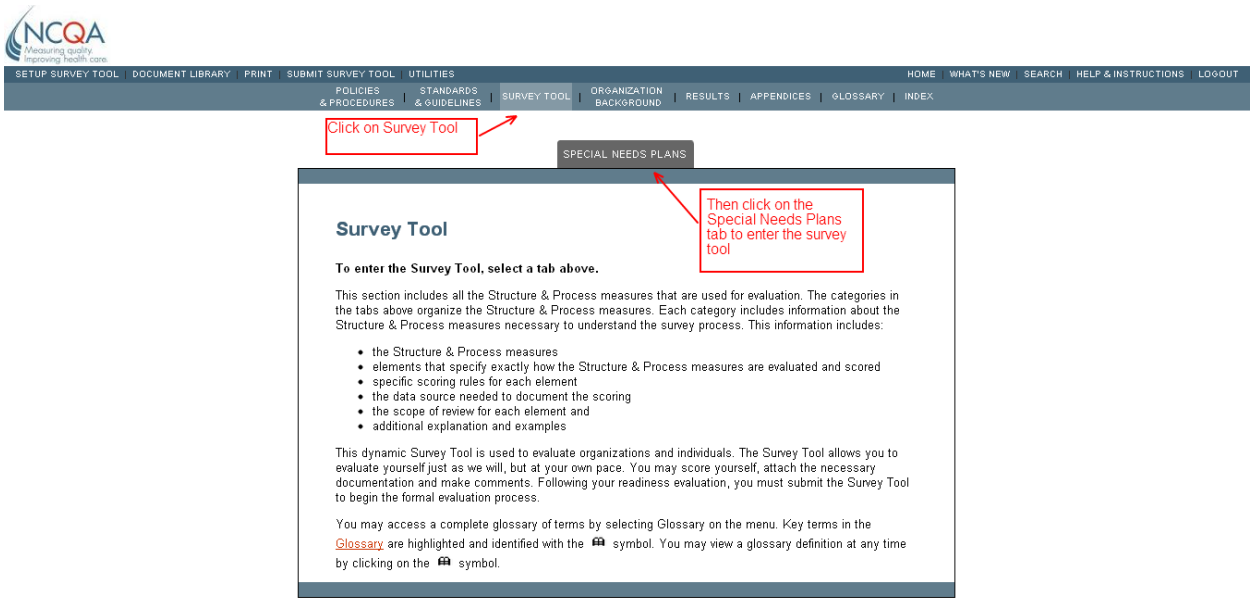

SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
Once in your survey tool, you should click here to set up your survey tool
You will need to select your Evaluation Option here to indicate if this is a new or returning SNP plan benefit package
Special Needs Plans
This category includes the following
SNP1 - Complex Case M
Elements: A - B - C - D
SNP2 - Improving Membe
Elements: A - B - C
SNP3 - Clinical Quality In
Elements: A
SNP4 - Care Transitions
Elements: A - B - C - D - E - F
SNP5 - Institutional SNP Relationship With Facility
Untitled - Google Chrome
https://iss.ncqa.org/RDSat/ATManageATMenu.asp
Setup Survey Tool
SETUP MENU | UNIT OF ASSESSMENT | EVALUATION OPTIONS | SUBMIT SURVEY TOOL
Select Product Line/Product - You must specify one or more Product Line/Product, because certain Standards and elements collect data specific to each Product Line/Product. In this section, you select the Product Lines/Products to include in the Survey Tool. You may revise your choices any time prior to submitting the Survey Tool.
Select Evaluation Options - In this section, you select the evaluation products you wish to use. The Survey Tool will reflect your selection and will automatically include the applicable Standards. You may revise your choices any time prior to submitting the Survey Tool.
Submit Survey Tool - To formally begin the survey process, you must submit an application for survey that includes the license number for your Survey Tool. We will work with you to confirm your application and set a submission date for the Survey Tool and any documentation. Your survey commences when you submit the Survey Tool, at which point we consider any documentation attached to be final. The Policies and Procedures provide complete details of the application and survey processes.
[close this window]

Screenshot 5B

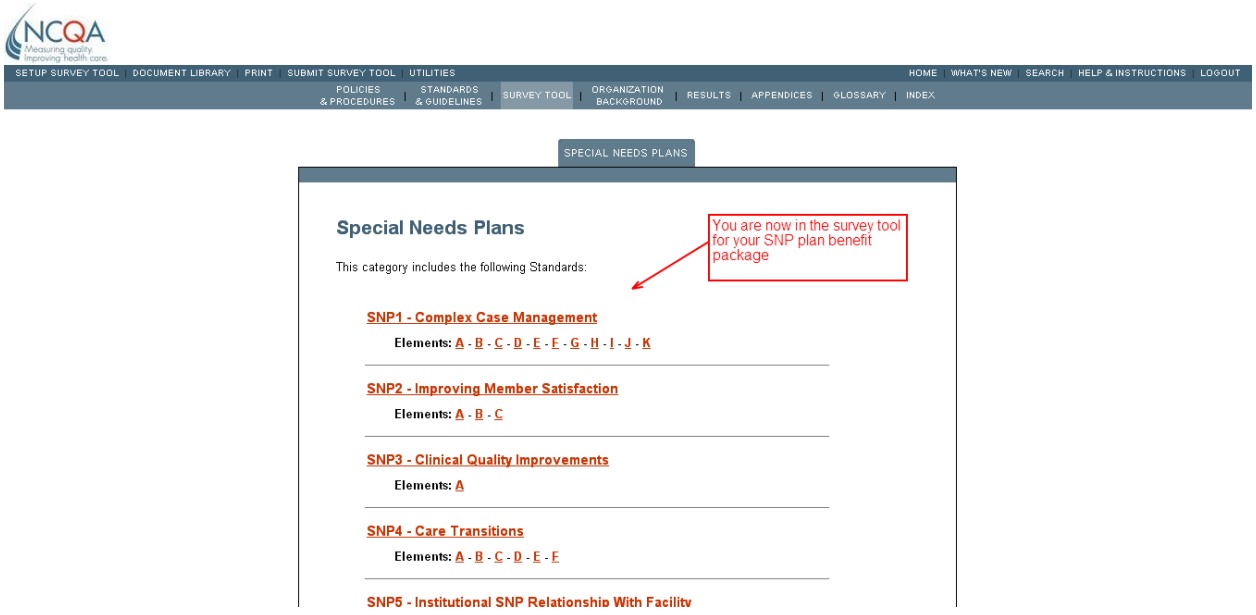
Set-up survey tool


Select Evaluation Options
SETUP MENU | UNIT OF ASSESSMENT | EVALUATION OPTIONS | SUBMIT SURVEY TOOL
Instructions
To conduct a readiness evaluation, and undergo survey, you must select from the evaluation options below. For additional information on selecting evaluation options, click on the instructions link above.
To select evaluation options for readiness evaluation, check the box for the product(s) in the "Select for Readiness Evaluation" column. To select evaluation options to submit for survey, check the box for the options in the "Select to Submit for Survey" column.
You may revise these selections at any time during your readiness evaluation.
Save
Evaluation Option
Survey Tool Complete
Select for Readiness Evaluation
Select to Submit for Survey
You may select any one of the following evaluation options:
Returning SNPs
Not Complete
New SNPs
Not Complete
Save
You should select the appropriate box under "Select for Readiness Evaluation", depending on whether you are a new or returning SNP
[close this window]
© 2002 – 2012 by National Committee for Quality Assurance, Patent Pending
Use of this Web site/application constitutes acceptance of the License Agreement and Privacy Policy

Screenshot 6A
Enter survey tool

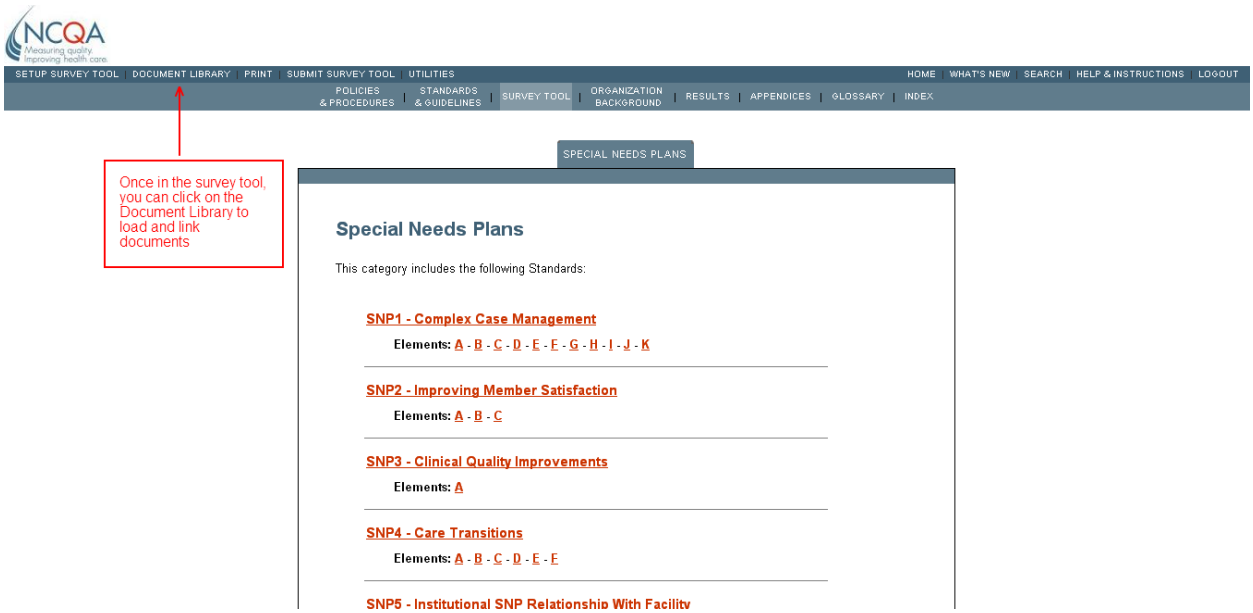

SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
Click on Survey Tool
SPECIAL NEEDS PLANS
Then click on the Special Needs Plans tab to enter the survey tool
Survey Tool
To enter the Survey Tool, select a tab above.
This section includes all the Structure & Process measures that are used for evaluation. The categories in the tabs above organize the Structure & Process measures. Each category includes information about the Structure & Process measures necessary to understand the survey process. This information includes:
the Structure & Process measures
elements that specify exactly how the Structure & Process measures are evaluated and scored
specific scoring rules for each element
the data source needed to document the scoring
the scope of review for each element and
additional explanation and examples
This dynamic Survey Tool is used to evaluate organizations and individuals. The Survey Tool allows you to evaluate yourself just as we will, but at your own pace. You may score yourself, attach the necessary documentation and make comments. Following your readiness evaluation, you must submit the Survey Tool to begin the formal evaluation process.
You may access a complete glossary of terms by selecting Glossary on the menu. Key terms in the Glossary are highlighted and identified with the symbol. You may view a glossary definition at any time by clicking on the symbol.

Screenshot 6B
ISS Survey Tool


SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
SPECIAL NEEDS PLANS
Special Needs Plans
You are now in the survey tool for your SNP plan benefit package
This category includes the following Standards:
SNP1 - Complex Case Management
Elements: A - B - C - D - E - F - G - H - I - J - K
SNP2 - Improving Member Satisfaction
Elements: A - B - C
SNP3 - Clinical Quality Improvements
Elements: A
SNP4 - Care Transitions
Elements: A - B - C - D - E - F
SNP5 - Institutional SNP Relationship With Facility

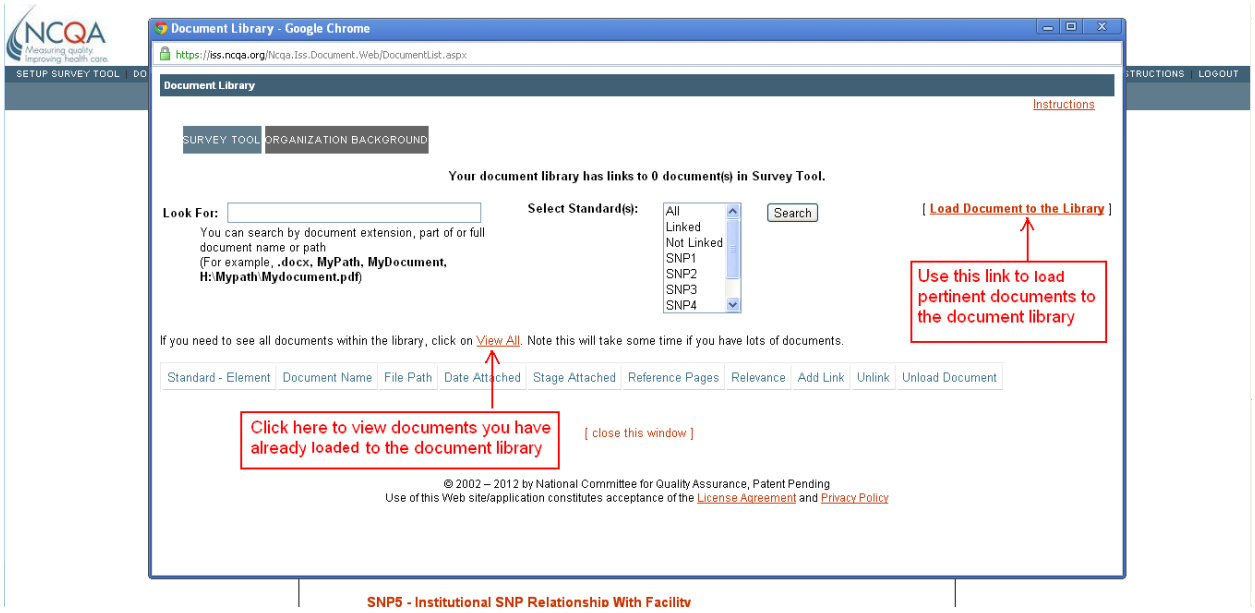
Screenshot 7A

Document Library


SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
Once in the survey tool, you can click on the Document Library to load and link documents
SPECIAL NEEDS PLANS
Special Needs Plans
This category includes the following Standards:
SNP1 - Complex Case Management
Elements: A - B - C - D - E - F - G - H - I - J - K
SNP2 - Improving Member Satisfaction
Elements: A - B - C
SNP3 - Clinical Quality Improvements
Elements: A
SNP4 - Care Transitions
Elements: A - B - C - D - E - F
SNP5 - Institutional SNP Relationship With Facility

Screenshot 7B

Document Library – loading documents


Document Library - Google Chrome
https://iss.ncqa.org/Ncqa.Iss.Document.Web/DocumentList.aspx
Document Library
Instructions
SURVEY TOOL | ORGANIZATION BACKGROUND
Your document library has links to 0 document(s) in Survey Tool.
Look For:
You can search by document extension, part of or full document name or path
(For example, .docx, MyPath, MyDocument, H:\Mypath\Mydocument.pdf)
Select Standard(s):
All
Linked
Not Linked
SNP1
SNP2
SNP3
SNP4
Search
[Load Document to the Library]
Use this link to load pertinent documents to the document library
If you need to see all documents within the library, click on View All. Note this will take some time if you have lots of documents.
Standard - Element | Document Name | File Path | Date Attached | Stage Attached | Reference Pages | Relevance | Add Link | Unlink | Unload Document
Click here to view documents you have already loaded to the document library
[close this window]
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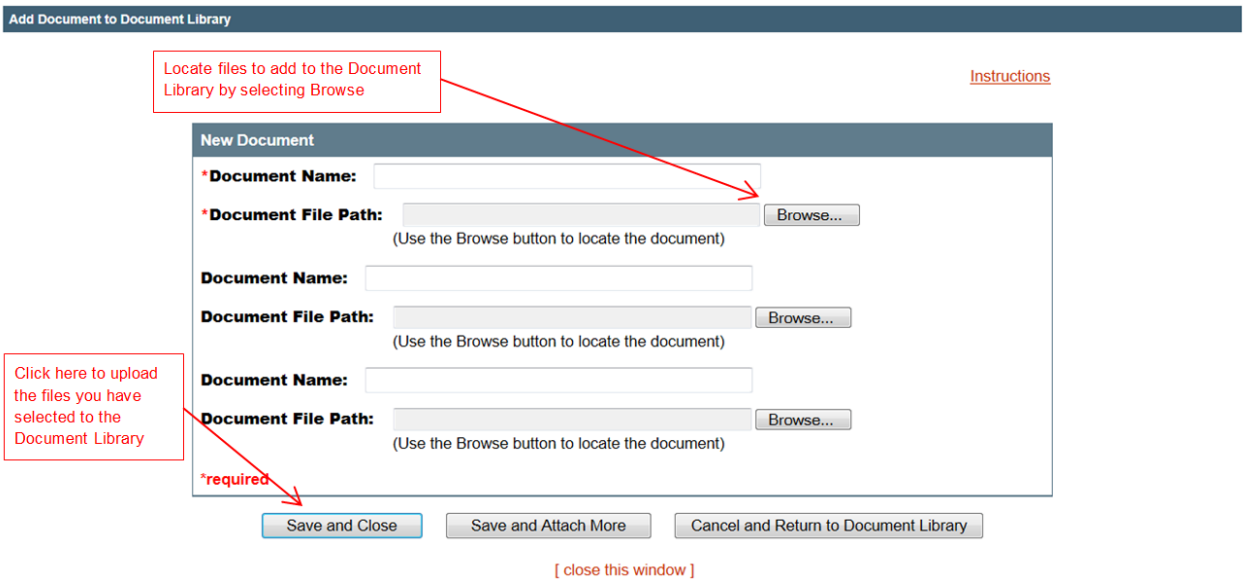
Use of this Web site/application constitutes acceptance of the License Agreement and Privacy Policy
SNP5 - Institutional SNP Relationship With Facility

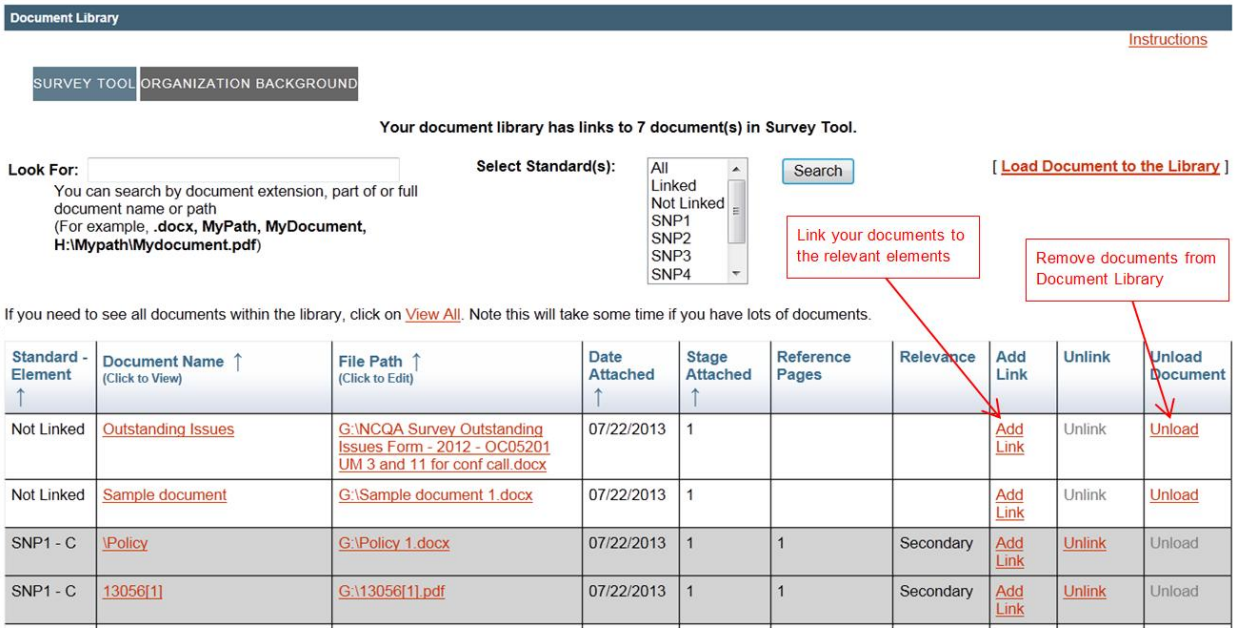
Screenshot 7C

Document Library – loading documents


Add Document to Document Library
Locate files to add to the Document Library by selecting Browse
Instructions
New Document
*Document Name:
*Document File Path:
Browse...
(Use the Browse button to locate the document)
Document Name:
Document File Path:
Browse...
(Use the Browse button to locate the document)
Document Name:
Document File Path:
Browse...
(Use the Browse button to locate the document)
Click here to upload the files you have selected to the Document Library
*required
Save and Close
Save and Attach More
Cancel and Return to Document Library
[close this window]

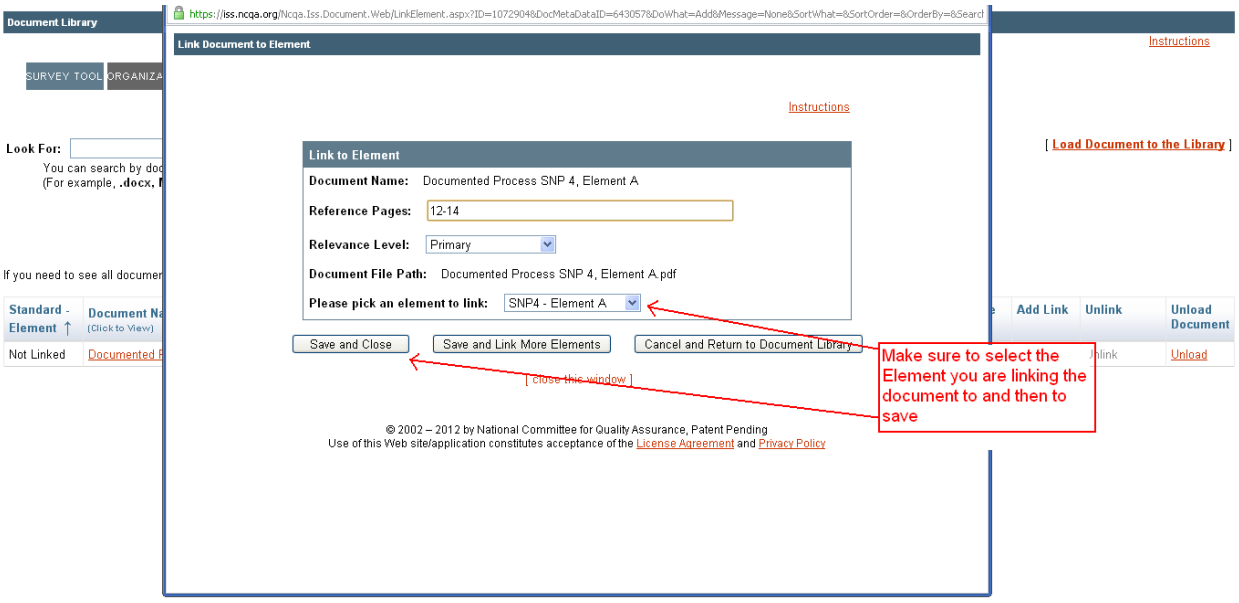
Screenshot 7D

Document Library – linking or unloading documents



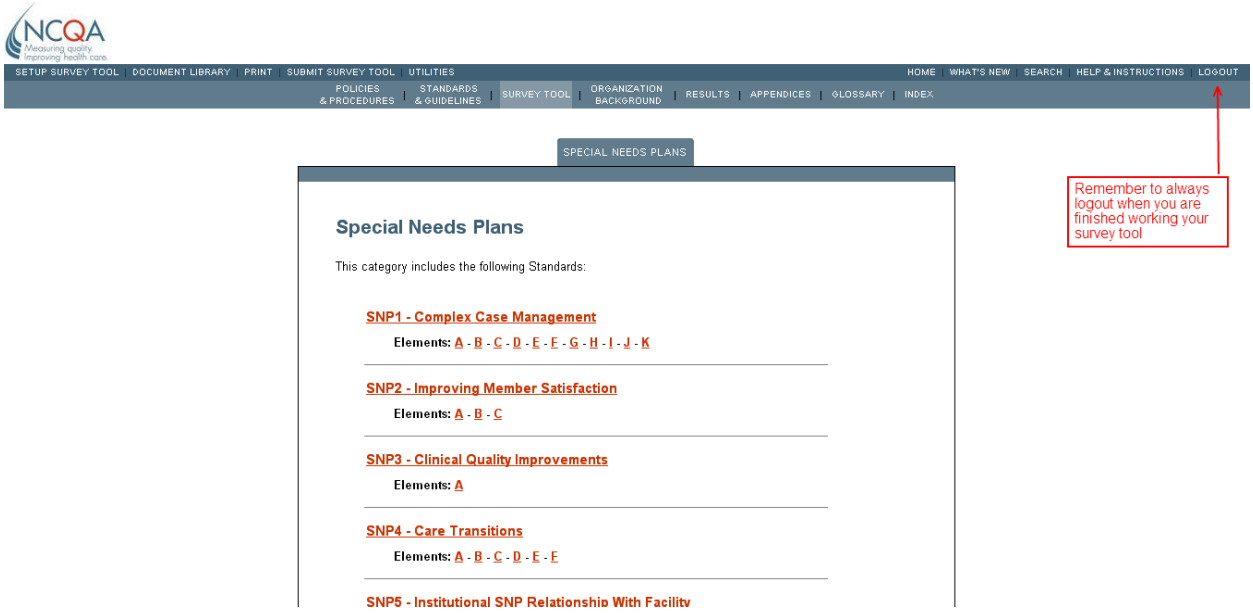
Screenshot 7E

Document Library – linking documents

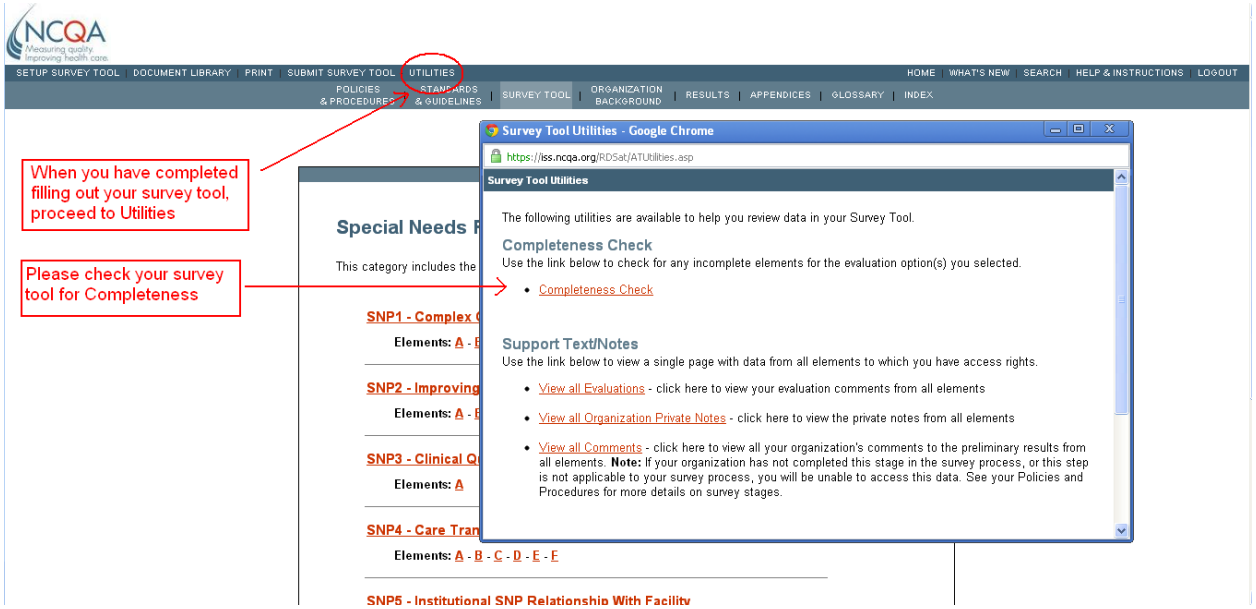

Document Library
Link Document to Element
Instructions
Link to Element
Document Name: Documented Process SNP 4, Element A
Reference Pages: 12-14
Relevance Level: Primary
Document File Path: Documented Process SNP 4, Element A.pdf
Please pick an element to link: SNP4 - Element A
Save and Close
Save and Link More Elements
Cancel and Return to Document Library
[Close this window]
© 2002 – 2012 by National Committee for Quality Assurance, Patent Pending
Use of this Web site/application constitutes acceptance of the License Agreement and Privacy Policy
Make sure to select the Element you are linking the document to and then to save
[Load Document to the Library]
Look For:
Standard - Element
Not Linked
Add Link
Unlink
Unload Document
Unload

Screenshot 8A

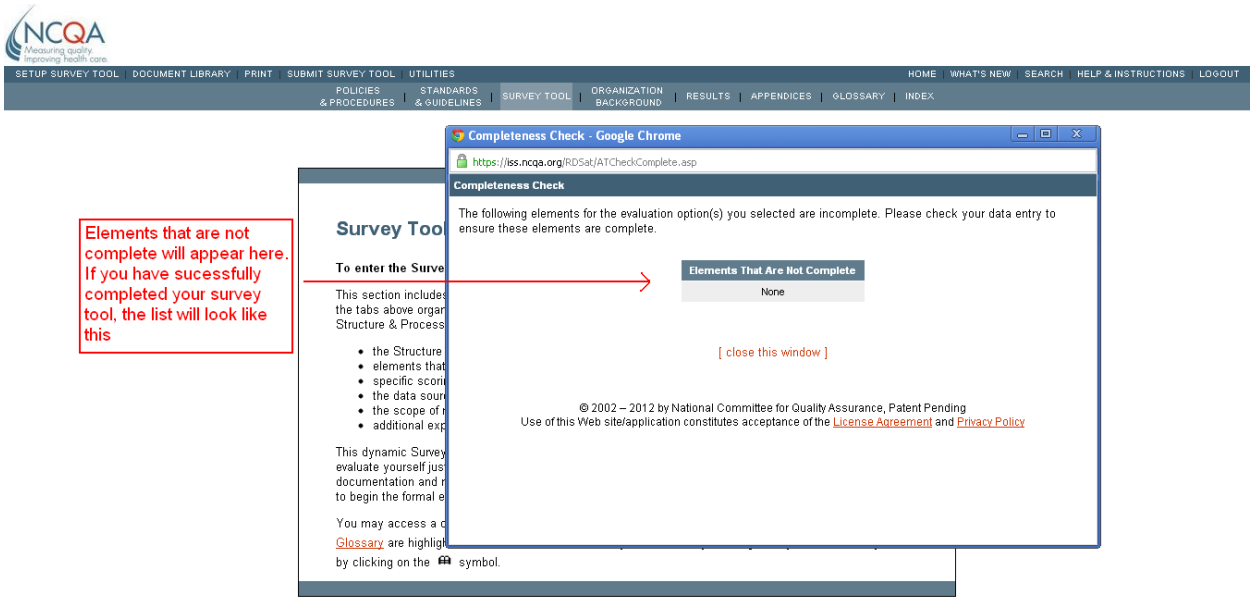
Log out


NCQA
SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
SPECIAL NEEDS PLANS
Special Needs Plans
This category includes the following Standards:
SNP1 - Complex Case Management
Elements: A - B - C - D - E - F - G - H - I - J - K
SNP2 - Improving Member Satisfaction
Elements: A - B - C
SNP3 - Clinical Quality Improvements
Elements: A
SNP4 - Care Transitions
Elements: A - B - C - D - E - F
SNP5 - Institutional SNP Relationship With Facility
Remember to always logout when you are finished working your survey tool

Screenshot 9A
Completeness check


When you have completed filling out your survey tool, proceed to Utilities
Please check your survey tool for Completeness
SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
Survey Tool Utilities - Google Chrome
https://iss.ncqa.org/RDSat/ATUtilities.asp
Survey Tool Utilities
The following utilities are available to help you review data in your Survey Tool.
Completeness Check
Use the link below to check for any incomplete elements for the evaluation option(s) you selected.
Completeness Check
Support Text/Notes
Use the link below to view a single page with data from all elements to which you have access rights.
View all Evaluations - click here to view your evaluation comments from all elements
View all Organization Private Notes - click here to view the private notes from all elements
View all Comments - click here to view all your organization's comments to the preliminary results from all elements. Note: If your organization has not completed this stage in the survey process, or this step is not applicable to your survey process, you will be unable to access this data. See your Policies and Procedures for more details on survey stages.
Special Needs
This category includes the
SNP1 - Complex
Elements: A
SNP2 - Improving
Elements: A
SNP3 - Clinical Q
Elements: A
SNP4 - Care Tran
Elements: A - B - C - D - E - F
SNP5 - Institutional SNP Relationship With Facility

Screenshot 9B
Completeness check


Elements that are not complete will appear here. If you have sucessfully completed your survey tool, the list will look like this
SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
Completeness Check - Google Chrome
https://iss.ncqa.org/RDSat/ATCheckComplete.asp
Completeness Check
The following elements for the evaluation option(s) you selected are incomplete. Please check your data entry to ensure these elements are complete.
Elements That Are Not Complete
None
[close this window]
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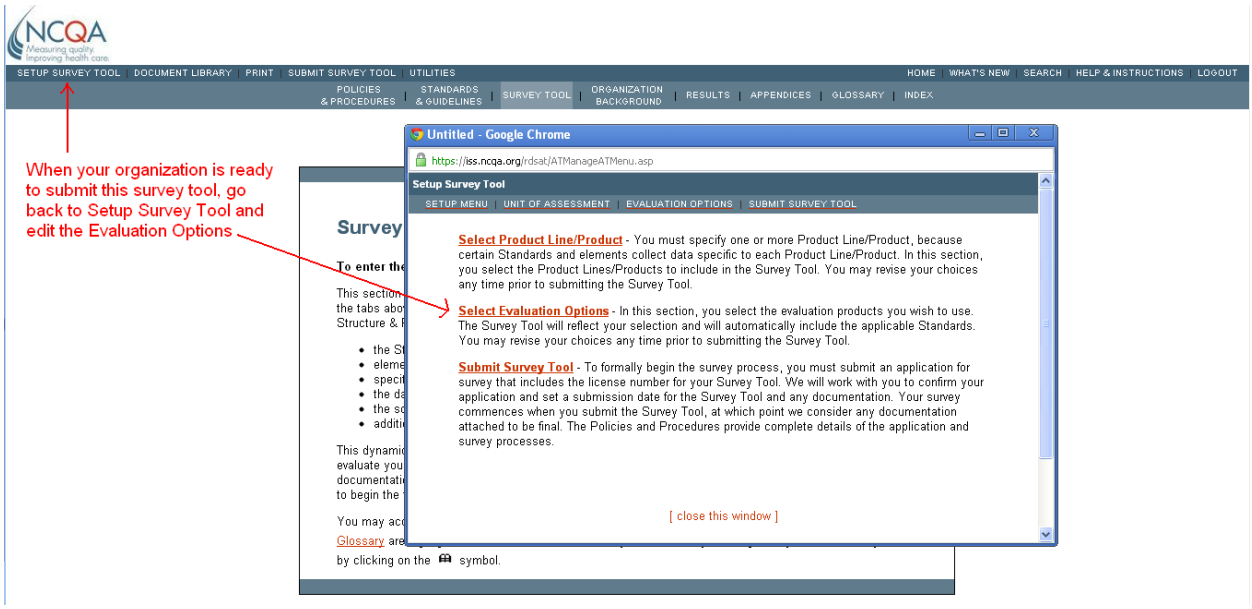
Survey Tool
To enter the Surve
This section includes
the tabs above organ
Structure & Process
the Structure
elements that
specific scori
the data sour
the scope of
additional exp
This dynamic Survey
evaluate yourself jus
documentation and
to begin the formal e
You may access a
Glossary are highlig
by clicking on the symbol.

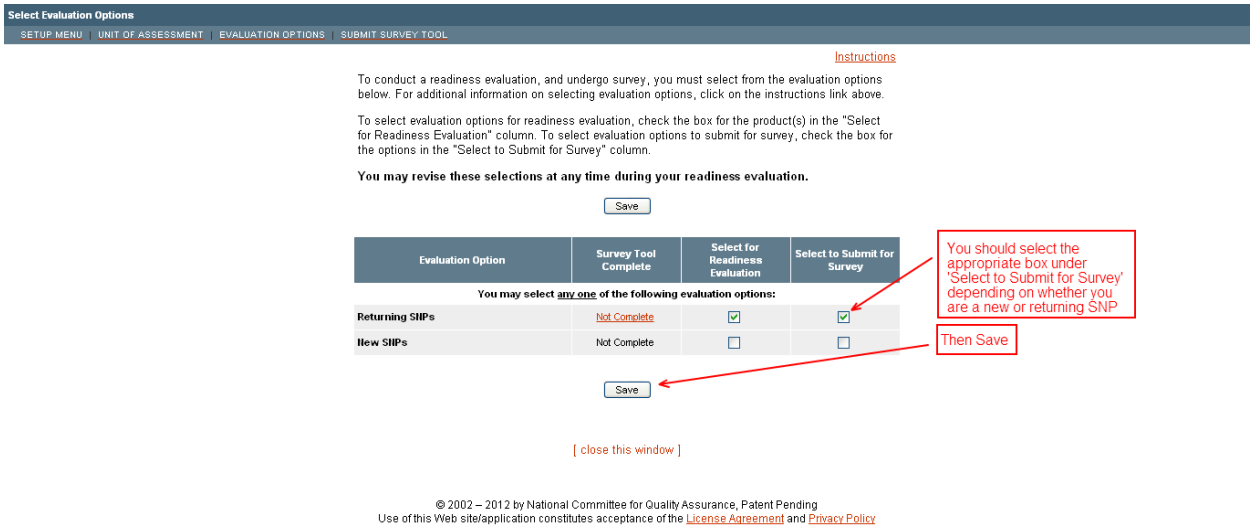
Screenshot 10A

Submit survey tool


When your organization is ready to submit this survey tool, go back to Setup Survey Tool and edit the Evaluation Options
SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
Untitled - Google Chrome
https://iss.ncqa.org/rdsat/ATManageATMenu.asp
Setup Survey Tool
SETUP MENU | UNIT OF ASSESSMENT | EVALUATION OPTIONS | SUBMIT SURVEY TOOL
Select Product Line/Product - You must specify one or more Product Line/Product, because certain Standards and elements collect data specific to each Product Line/Product. In this section, you select the Product Lines/Products to include in the Survey Tool. You may revise your choices any time prior to submitting the Survey Tool.
Select Evaluation Options - In this section, you select the evaluation products you wish to use. The Survey Tool will reflect your selection and will automatically include the applicable Standards. You may revise your choices any time prior to submitting the Survey Tool.
Submit Survey Tool - To formally begin the survey process, you must submit an application for survey that includes the license number for your Survey Tool. We will work with you to confirm your application and set a submission date for the Survey Tool and any documentation. Your survey commences when you submit the Survey Tool, at which point we consider any documentation attached to be final. The Policies and Procedures provide complete details of the application and survey processes.
[close this window]
by clicking on the symbol.

Screenshot 10B

Submit survey tool


Select Evaluation Options
SETUP MENU | UNIT OF ASSESSMENT | EVALUATION OPTIONS | SUBMIT SURVEY TOOL
Instructions
To conduct a readiness evaluation, and undergo survey, you must select from the evaluation options below. For additional information on selecting evaluation options, click on the instructions link above.
To select evaluation options for readiness evaluation, check the box for the product(s) in the "Select for Readiness Evaluation" column. To select evaluation options to submit for survey, check the box for the options in the "Select to Submit for Survey" column.
You may revise these selections at any time during your readiness evaluation.
Save
Evaluation Option | Survey Tool Complete | Select for Readiness Evaluation | Select to Submit for Survey
You may select any one of the following evaluation options:
Returning SNPs | Not Complete | ☑ | ☑
New SNPs | Not Complete | ☐ | ☐
You should select the appropriate box under 'Select to Submit for Survey' depending on whether you are a new or returning SNP
Then Save
Save
[close this window]
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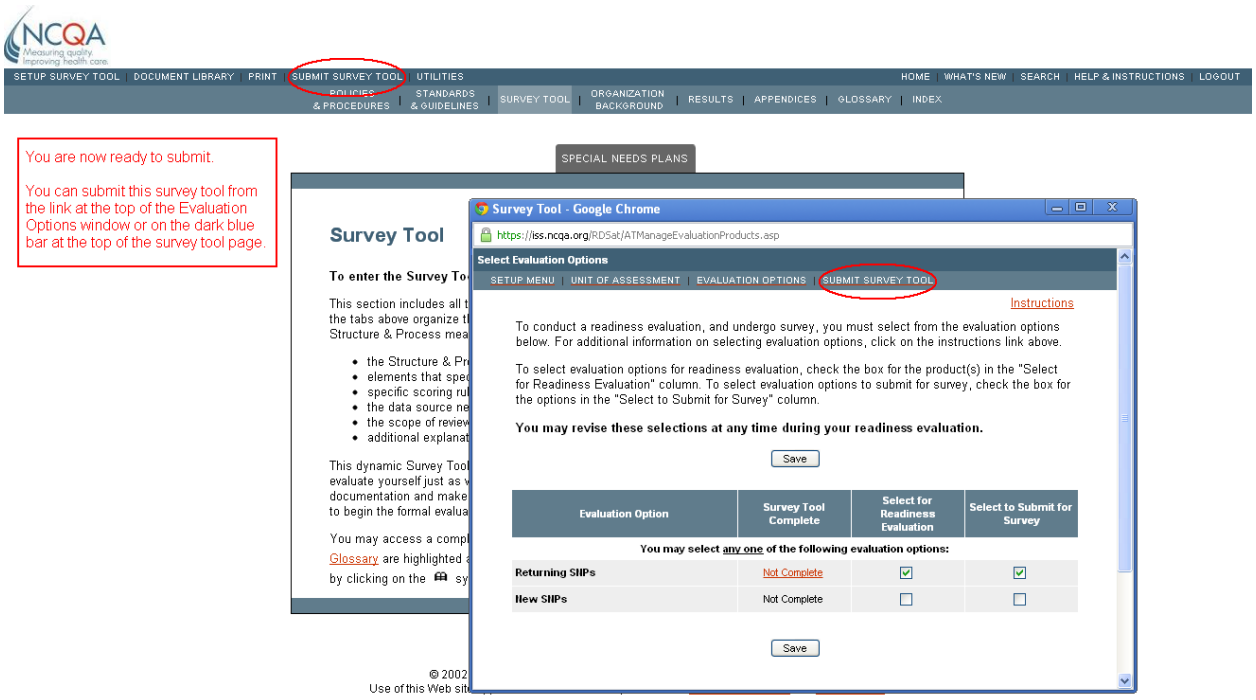
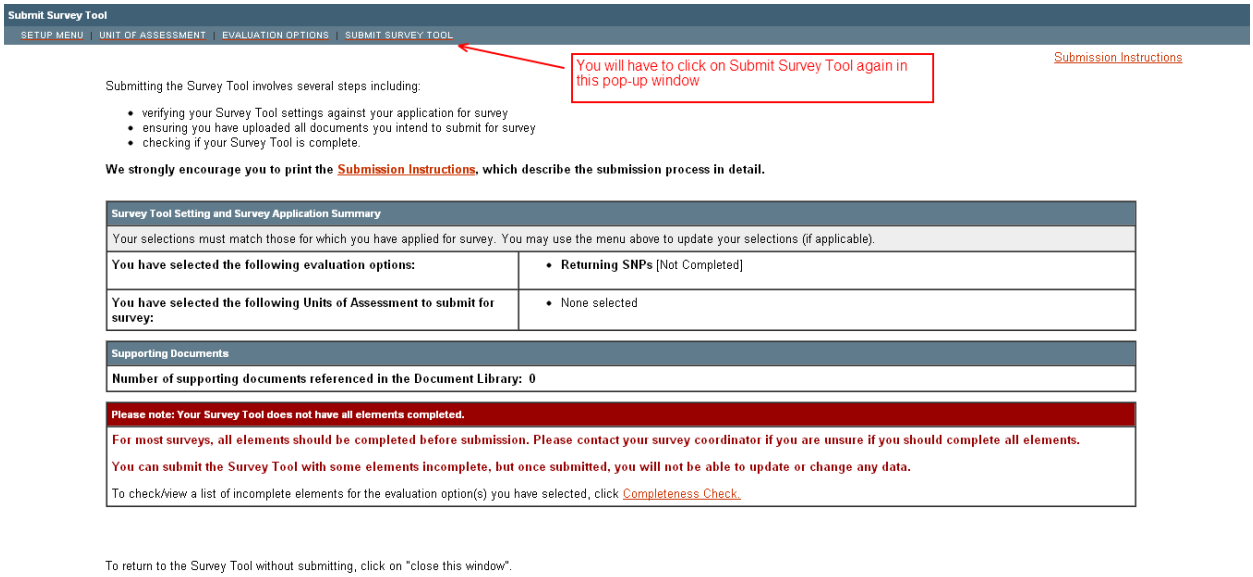
Screenshot 10C

Submit survey tool

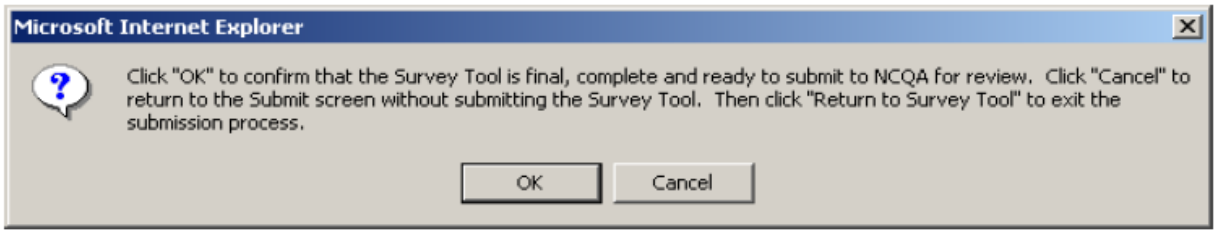

SETUP SURVEY TOOL | DOCUMENT LIBRARY | PRINT | SUBMIT SURVEY TOOL | UTILITIES
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
You are now ready to submit.
You can submit this survey tool from the link at the top of the Evaluation Options window or on the dark blue bar at the top of the survey tool page.
SPECIAL NEEDS PLANS
Survey Tool
Survey Tool - Google Chrome
https://iss.ncqa.org/RDSat/ATManageEvaluationProducts.asp
Select Evaluation Options
SETUP MENU | UNIT OF ASSESSMENT | EVALUATION OPTIONS | SUBMIT SURVEY TOOL
Instructions
To conduct a readiness evaluation, and undergo survey, you must select from the evaluation options below. For additional information on selecting evaluation options, click on the instructions link above.
To select evaluation options for readiness evaluation, check the box for the product(s) in the "Select for Readiness Evaluation" column. To select evaluation options to submit for survey, check the box for the options in the "Select to Submit for Survey" column.
You may revise these selections at any time during your readiness evaluation.
Save
Evaluation Option
Survey Tool Complete
Select for Readiness Evaluation
Select to Submit for Survey
You may select any one of the following evaluation options:
Returning SNPs
Not Complete
New SNPs
Not Complete
Save

Screenshot 10D

Submit survey tool

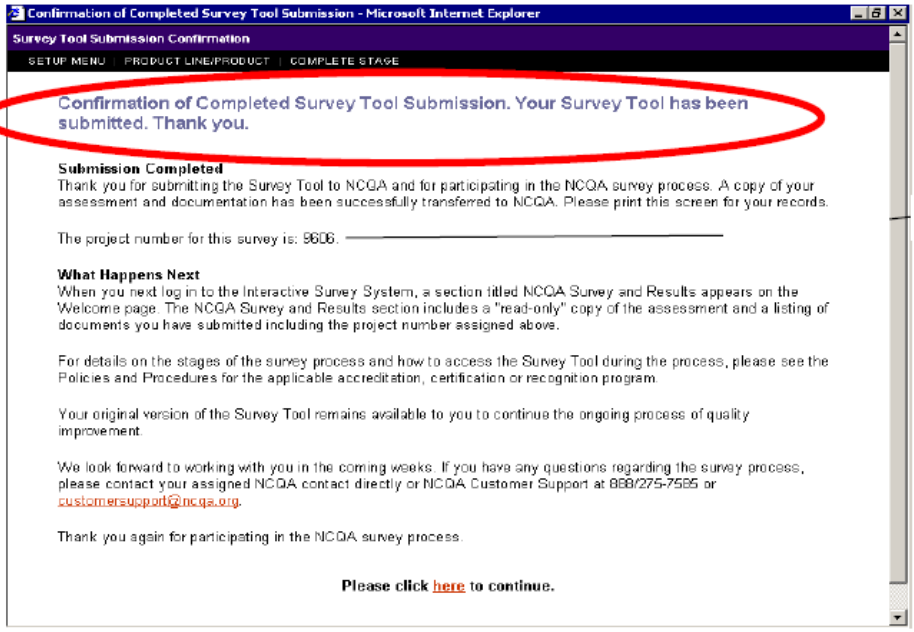

Submit Survey Tool
SETUP MENU | UNIT OF ASSESSMENT | EVALUATION OPTIONS | SUBMIT SURVEY TOOL
You will have to click on Submit Survey Tool again in this pop-up window
Submission Instructions
Submitting the Survey Tool involves several steps including:
verifying your Survey Tool settings against your application for survey
ensuring you have uploaded all documents you intend to submit for survey
checking if your Survey Tool is complete.
We strongly encourage you to print the Submission Instructions, which describe the submission process in detail.
Survey Tool Setting and Survey Application Summary
Your selections must match those for which you have applied for survey. You may use the menu above to update your selections (if applicable).
You have selected the following evaluation options:
Returning SNPs [Not Completed]
You have selected the following Units of Assessment to submit for survey:
None selected
Supporting Documents
Number of supporting documents referenced in the Document Library: 0
Please note: Your Survey Tool does not have all elements completed.
For most surveys, all elements should be completed before submission. Please contact your survey coordinator if you are unsure if you should complete all elements.
You can submit the Survey Tool with some elements incomplete, but once submitted, you will not be able to update or change any data.
To check/view a list of incomplete elements for the evaluation option(s) you have selected, click Completeness Check.
To return to the Survey Tool without submitting, click on "close this window".

Screenshot 10E
Submit survey tool


Microsoft Internet Explorer
Click "OK" to confirm that the Survey Tool is final, complete and ready to submit to NCQA for review. Click "Cancel" to return to the Submit screen without submitting the Survey Tool. Then click "Return to Survey Tool" to exit the submission process.
OK
Cancel

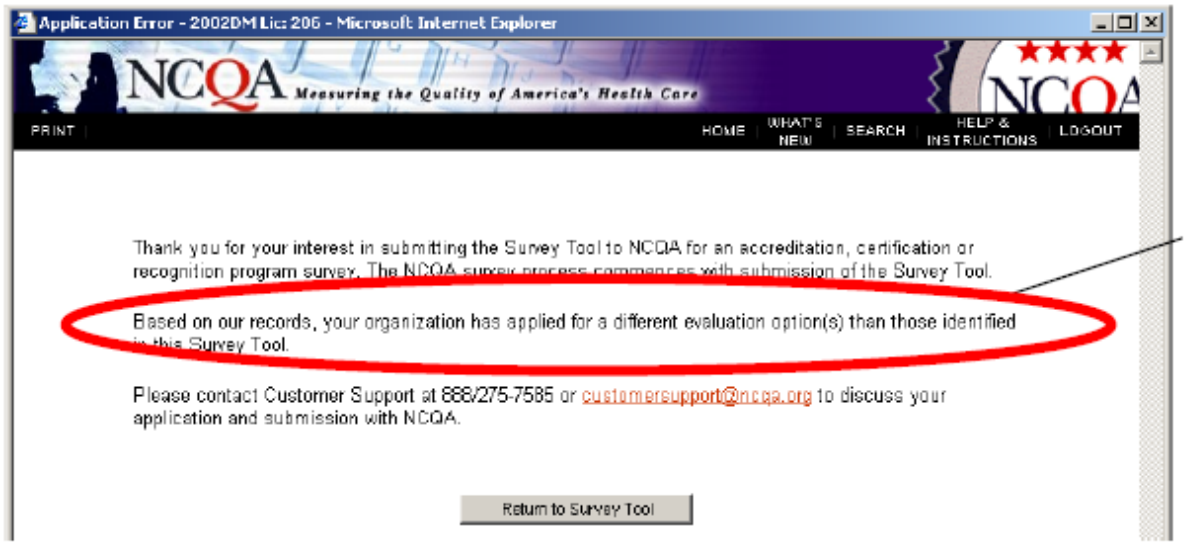
You will be prompted to confirm the submission. Once submitted, a survey tool cannot be changed.

Screenshot 10F
Submit survey tool


Confirmation of Completed Survey Tool Submission - Microsoft Internet Explorer
Survey Tool Submission Confirmation
SETUP MENU | PRODUCT LINE/PRODUCT | COMPLETE STAGE
Confirmation of Completed Survey Tool Submission. Your Survey Tool has been submitted. Thank you.
Submission Completed
Thank you for submitting the Survey Tool to NCQA and for participating in the NCQA survey process. A copy of your assessment and documentation has been successfully transferred to NCQA. Please print this screen for your records.
The project number for this survey is: 9606.
What Happens Next
When you next log in to the Interactive Survey System, a section titled NCQA Survey and Results appears on the Welcome page. The NCQA Survey and Results section includes a "read-only" copy of the assessment and a listing of documents you have submitted including the project number assigned above.
For details on the stages of the survey process and how to access the Survey Tool during the process, please see the Policies and Procedures for the applicable accreditation, certification or recognition program.
Your original version of the Survey Tool remains available to you to continue the ongoing process of quality improvement.
We look forward to working with you in the coming weeks. If you have any questions regarding the survey process, please contact your assigned NCQA contact directly or NCQA Customer Support at 888/275-7585 or customersupport@ncqa.org.
Thank you again for participating in the NCQA survey process.
Please click here to continue.

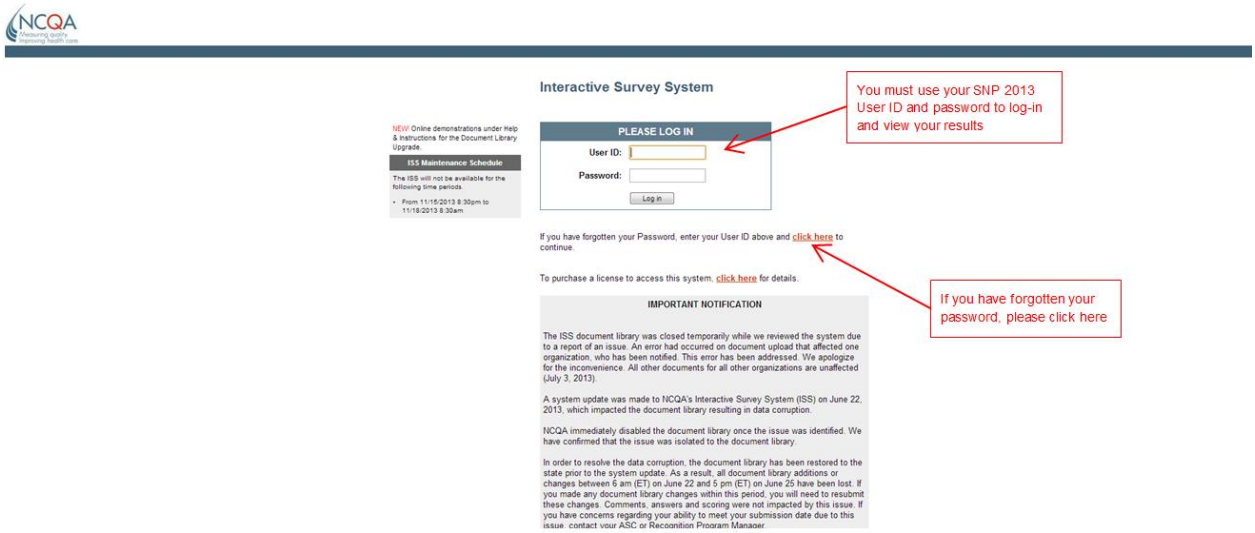
This page confirms that your survey tool has been submitted.

Screenshot 10G
Submit survey tool

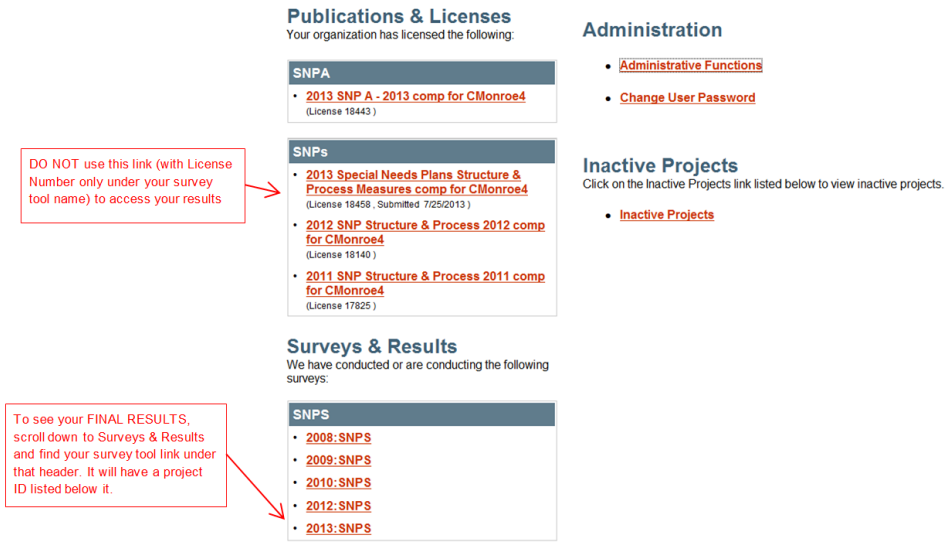

Application Error - 2002DM Lic: 206 - Microsoft Internet Explorer
NCQA Measuring the Quality of America's Health Care
NCQA
PRINT
HOME
WHAT'S NEW
SEARCH
HELP & INSTRUCTIONS
LOGOUT
Thank you for your interest in submitting the Survey Tool to NCQA for an accreditation, certification or recognition program survey. The NCQA survey process commences with submission of the Survey Tool.
Based on our records, your organization has applied for a different evaluation option(s) than those identified in this Survey Tool.
Please contact Customer Support at 888/275-7585 or customersupport@ncqa.org to discuss your application and submission with NCQA.
Return to Survey Tool

If you get an error message that says "your organization has applied for a different evaluation option(s) than those identified in the survey tool" you may have selected the wrong evaluation option (new versus returning SNP) in screenshot 10B

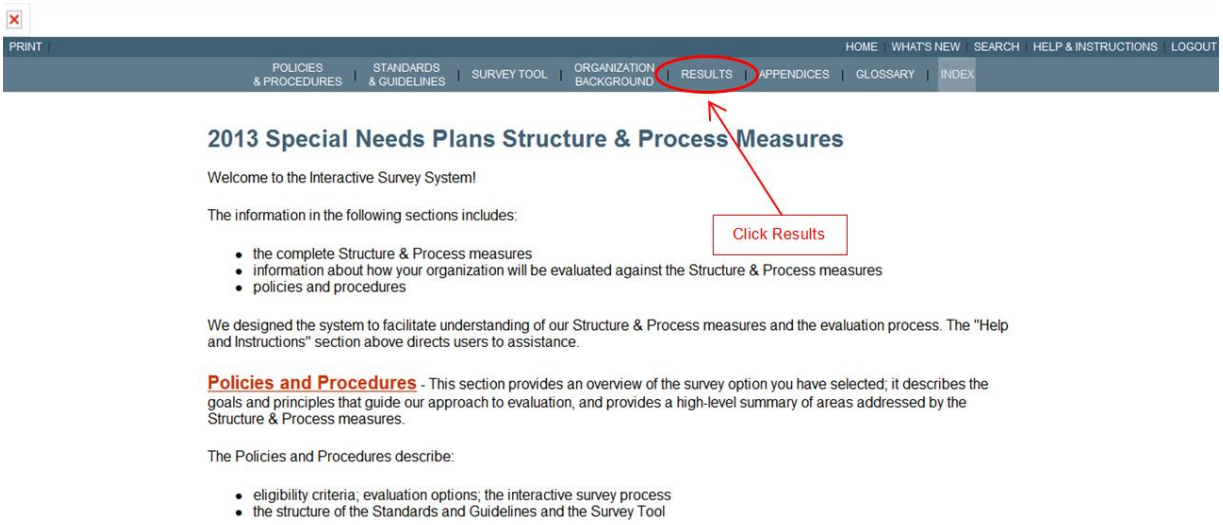
Screenshot 11A
View final results


Interactive Survey System
You must use your SNP 2013 User ID and password to log-in and view your results
PLEASE LOG IN
User ID:
Password:
Log in
If you have forgotten your Password, enter your User ID above and click here to continue.
To purchase a license to access this system, click here for details.
If you have forgotten your password, please click here
IMPORTANT NOTIFICATION

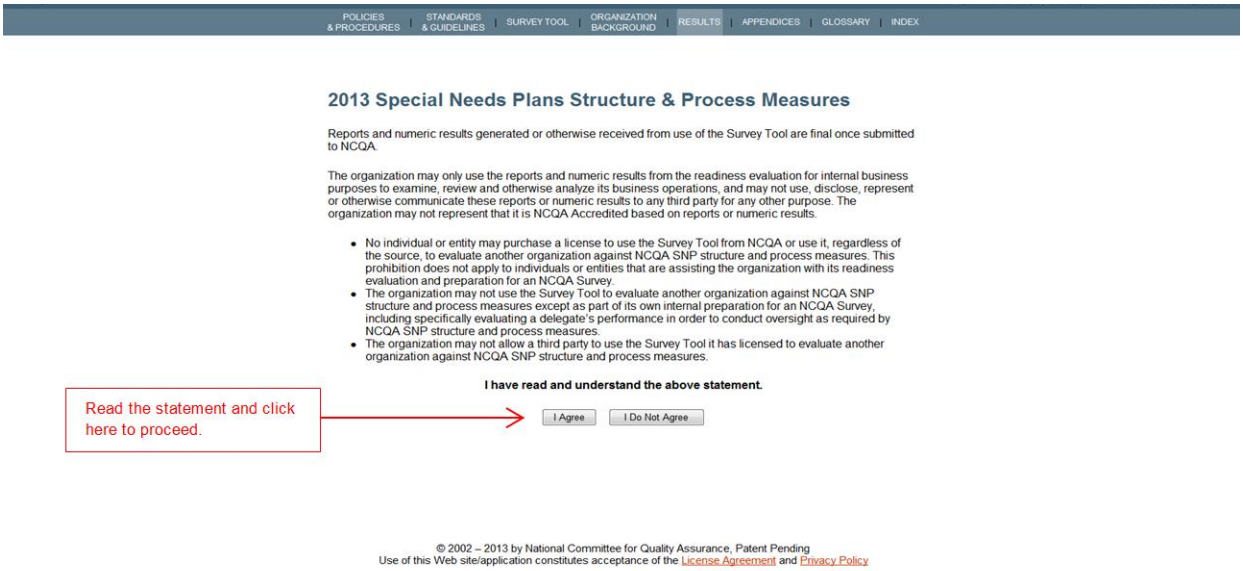
Screenshot 11B
View final results


Publications & Licenses
Your organization has licensed the following:
SNPA
2013 SNP A - 2013 comp for CMonroe4
(License 18443)
SNPs
DO NOT use this link (with License Number only under your survey tool name) to access your results
2013 Special Needs Plans Structure & Process Measures comp for CMonroe4
(License 18458 , Submitted 7/25/2013)
2012 SNP Structure & Process 2012 comp for CMonroe4
(License 18140)
2011 SNP Structure & Process 2011 comp for CMonroe4
(License 17825)
Surveys & Results
We have conducted or are conducting the following surveys:
To see your FINAL RESULTS, scroll down to Surveys & Results and find your survey tool link under that header. It will have a project ID listed below it.
SNPS
2008:SNPS
2009:SNPS
2010:SNPS
2012:SNPS
2013:SNPS
Administration
Administrative Functions
Change User Password
Inactive Projects
Click on the Inactive Projects link listed below to view inactive projects.
Inactive Projects

Screenshot 11C
View final results


PRINT
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
2013 Special Needs Plans Structure & Process Measures
Welcome to the Interactive Survey System!
The information in the following sections includes:
Click Results
the complete Structure & Process measures
information about how your organization will be evaluated against the Structure & Process measures
policies and procedures
We designed the system to facilitate understanding of our Structure & Process measures and the evaluation process. The "Help and Instructions" section above directs users to assistance.
Policies and Procedures - This section provides an overview of the survey option you have selected; it describes the goals and principles that guide our approach to evaluation, and provides a high-level summary of areas addressed by the Structure & Process measures.
The Policies and Procedures describe:
eligibility criteria; evaluation options; the interactive survey process
the structure of the Standards and Guidelines and the Survey Tool

Screenshot 11D
View final results


POLICIES & PROCEDURES | STANDARDS & GUIDELINES | SURVEY TOOL | ORGANIZATION BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
2013 Special Needs Plans Structure & Process Measures
Reports and numeric results generated or otherwise received from use of the Survey Tool are final once submitted to NCQA.
The organization may only use the reports and numeric results from the readiness evaluation for internal business purposes to examine, review and otherwise analyze its business operations, and may not use, disclose, represent or otherwise communicate these reports or numeric results to any third party for any other purpose. The organization may not represent that it is NCQA Accredited based on reports or numeric results.
No individual or entity may purchase a license to use the Survey Tool from NCQA or use it, regardless of the source, to evaluate another organization against NCQA SNP structure and process measures. This prohibition does not apply to individuals or entities that are assisting the organization with its readiness evaluation and preparation for an NCQA Survey.
The organization may not use the Survey Tool to evaluate another organization against NCQA SNP structure and process measures except as part of its own internal preparation for an NCQA Survey, including specifically evaluating a delegate's performance in order to conduct oversight as required by NCQA SNP structure and process measures.
The organization may not allow a third party to use the Survey Tool it has licensed to evaluate another organization against NCQA SNP structure and process measures.
I have read and understand the above statement.
Read the statement and click here to proceed.
I Agree
I Do Not Agree
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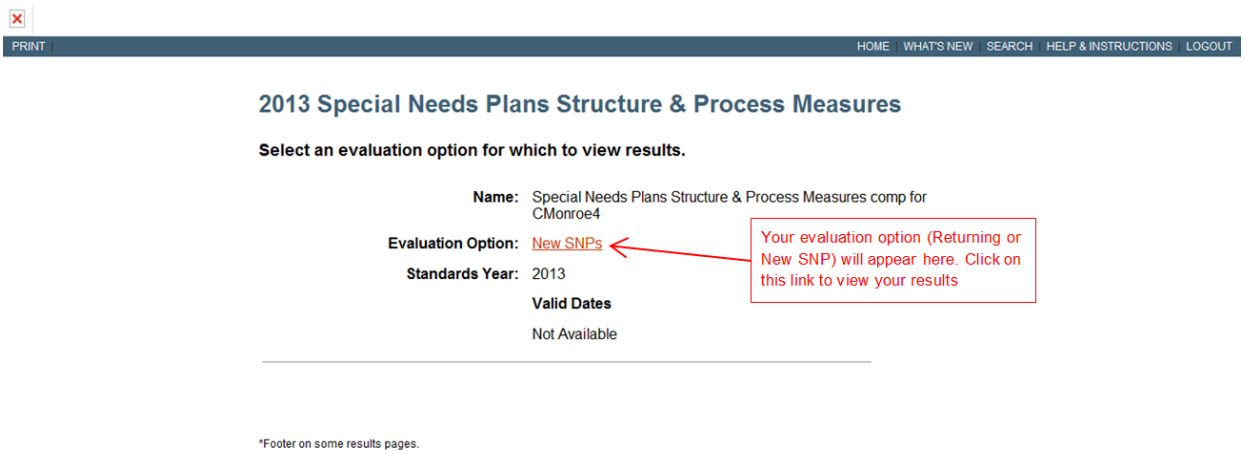
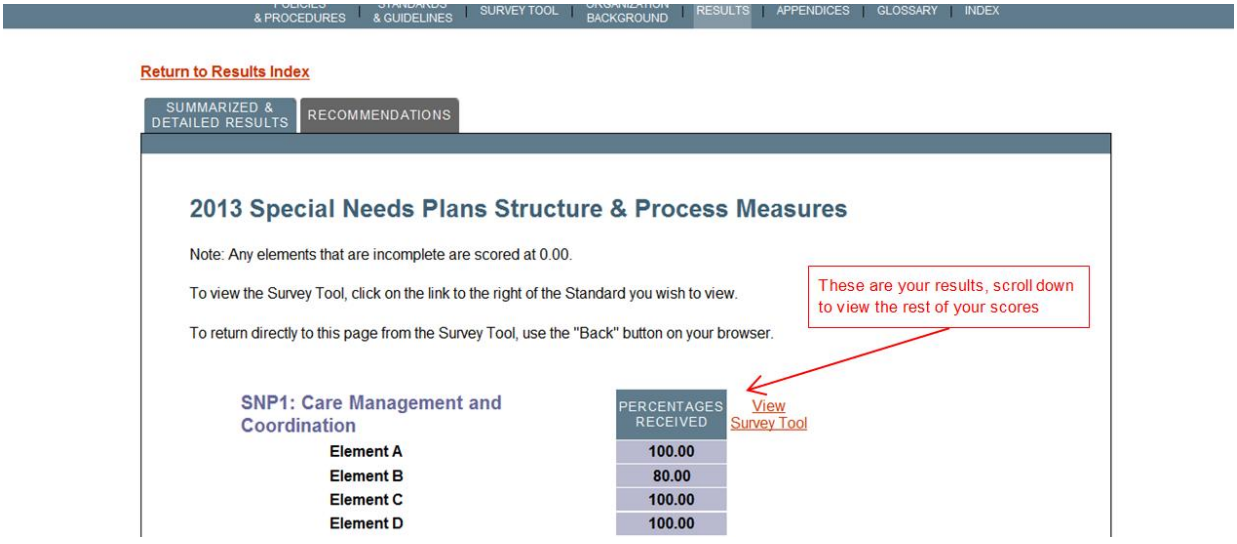
Use of this Web site/application constitutes acceptance of the License Agreement and Privacy Policy

Screenshot 11E
View final results


PRINT
HOME | WHAT'S NEW | SEARCH | HELP & INSTRUCTIONS | LOGOUT
2013 Special Needs Plans Structure & Process Measures
Select an evaluation option for which to view results.
Name: Special Needs Plans Structure & Process Measures comp for CMonroe4
Evaluation Option: New SNPs
Standards Year: 2013
Valid Dates
Not Available
Your evaluation option (Returning or New SNP) will appear here. Click on this link to view your results
*Footer on some results pages.

Screenshot 11F
View final results


& PROCEDURES | & GUIDELINES | SURVEY TOOL | BACKGROUND | RESULTS | APPENDICES | GLOSSARY | INDEX
Return to Results Index
SUMMARIZED & DETAILED RESULTS
RECOMMENDATIONS
2013 Special Needs Plans Structure & Process Measures
Note: Any elements that are incomplete are scored at 0.00.
To view the Survey Tool, click on the link to the right of the Standard you wish to view.
To return directly to this page from the Survey Tool, use the "Back" button on your browser.
These are your results, scroll down to view the rest of your scores
SNP1: Care Management and Coordination
PERCENTAGES RECEIVED
View Survey Tool
Element A 100.00
Element B 80.00
Element C 100.00
Element D 100.00

ISS Documentation Tips

ISS Documentation Tips

- Maintain documents on a shared drive.
- Consider creating folders for each Structure and Process measure
- Establish a system for version control.
- Name documents clearly – your audience is both internal staff and surveyors.
  - Avoid characters such as ampersand (&), apostrophe (‘) or (;) semicolon.
  - Avoid duplicate names.
- Use common file types such as: .doc (Word documents); .xls (Excel documents); .ppt (Power Point); .pdf (Adobe PDF); .gft; .jpg.
- Do not send .exe (executables).
- Documents that you do not have electronically can be scanned and converted to PDF, GIF or JPG.
- Consider including only relevant pages of a large document, with a copy of the document cover page on top.
- Consider converting your final Word or Excel documents to PDF format or making them “read only” to ensure no changes will be made.
- Try using legal line numbering as on the left of this page to identify areas that demonstrate performance.* (remember: this may change your pagination)
- Highlight key sentences or areas of your documents to call the surveyor’s attention to that area.
- Insert a hyperlink if necessary to demonstrate compliance by either copying the url: https://iss.ncqa.org/RDSat/ATLogin.asp or by using the “Insert” function of Word or Excel.
- Label drafts and final documents carefully to be able to distinguish between them.
- Use the date feature in footers to keep track of last time you updated the document (note that it defaults to updating every time you open the document, whether you made changes or not).

*Directions for legal line numbering in Word:

1. On the **File** menu, click **Page Setup**, and then click the **Layout** tab.
2. If you're adding line numbers to part of a document, click **Selected text** in the **Apply to** box.
3. Click **Line Numbers**.
4. Select the **Add line numbering** check box, and then select the options you want.